

Transgender Identities and Narrativity

Performativity, Agency, Corporeality

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For my parents Barry and Esta

Abstract

A study of transgender embodiment provides a unique vantage point from which to examine how people take up, and are constituted by, ideas about sex and gender. Discontinuities between the anatomical bodies and social identities of transgendered people trouble conventional understandings about bodies and selves. At the same time people who use gender reassignment technologies attach considerable authority to normalising discourses about bodies and identities, masculinity and femininity. This thesis explores subjectivity, agency, citizenship and community through analyses of conversations with 'transgendered' people in Australia and New Zealand.

The thesis consists of distinct but interrelated essays that explore the relationship between global technologies and the local achievement of identities. It illustrates how conversations about identity in transgendered social spaces are also discussions about the medicalisation of sex and gender and the social/institutional expectations associated with particular gender identities. Attention to the situated dimensions of social interaction suggests that it is not just discourses, but also corporeality and spaces, that make certain subject positions available to actors. Holding 'public stories' and the particularistic features of personal narratives in play, I argue that both stories and identities emerge from interaction - shifting and changing according to the spaces and times in which they are embedded.

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...As to those for whom to work hard, to begin and begin again, to attempt and be mistaken, to go back and rework everything from top to bottom, and still find reason to hesitate from one step to the next – as to those, in short, for whom to work in the midst of uncertainty and apprehension is tantamount to failure, all I can say is that clearly we are not from the same planet.

Michel Foucault (1985: 7) *The History of Sexuality, Vol. 2*

Foucault's words, at one time pinned to my office wall, provided me with considerable comfort while writing and rewriting drafts of chapters. The thesis is a collaborative effort it would not have been possible without the contributions from the following people and institutions.

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Table of Contents

| | |
|--------------------------|-----|
| Abstract | ii |
| Acknowledgements | iii |
| Table of Contents | iv |

| | | |
|-----------------------|---|-----------|
| Chapter One: | Mutable bodies constructed genders: | |
| | An introduction | 1 |
| | On sex and gender | 1 |
| | Getting started | 6 |
| | Retracing the analytic agendas | 10 |
| | Thesis overview | 13 |
| Chapter Two: | Constructing identities: | |
| | Narrativity, positioning, spaces | 19 |
| | Narrativity: evolving stories, (e)merging identities | 21 |
| | Language, meanings and stories | 27 |
| | Situated narratives and the politics of spaces | 34 |
| | Towards a corporeal narrativity | 42 |
| Chapter Three: | Generating collaborative stories | 44 |
| | Getting into place, generating stories | 46 |
| | Posing questions, doing research | 52 |
| | Cautionary tales | 58 |
| | Feminist theory as resource and constraint | 60 |
| | Interpretation: reproducing narratives, consuming stories | 64 |
| Chapter Four: | Changing bodies, shifting genders: Robyn's Story | 68 |
| | Introduction | 68 |
| | Robyn's story | 70 |
| | Life stories as fragments of biography | 75 |
| | A problem of language | 77 |
| | Doing masculinity, being feminine | 81 |
| | Medicine and public narratives of sex and gender | 84 |
| | Resisting conclusions | 95 |
| Chapter Five: | All the world's a stage: Performing transgender subjectivities | |
| | Norrie May Welby's Story | 99 |
| | Introduction | 100 |
| | Gender as performance | 101 |
| | <i>Habitus</i> , field and performativity | 104 |
| | Bricolage and stage(d) performances | 107 |
| | The doer behind the deed | 113 |
| | Destabilising heterosexuality through performativity | 120 |
| | <i>Habitus</i> , performativity and the social field | 123 |

| | | |
|-----------------------|--|------------|
| Chapter Six: | Storyed social action: Agency and the local achievement of identities | 126 |
| | Stories, actions and identities | 129 |
| | Liberal humanist actors | 133 |
| | Post-structuralist perspectives | 136 |
| | Embodied action and corporeal identities | 144 |
| | The agency, corporeality, action interface | 146 |
| | Agency and identities | 155 |
| Chapter Seven: | Crafting gender through medical technologies: Corporeality as resource and constraint | 157 |
| | Gender reassignment technologies | 159 |
| | Cosmetic surgery | 172 |
| | Speaking comparatively – using medical technologies to craft gender | 178 |
| | Connections and differences | 185 |
| Chapter Eight: | Exploring embodied citizenship: Registering identities, regulating bodies | 188 |
| | Registering sexed identities | 191 |
| | Management tools and surveillance mechanisms | 198 |
| | Modern citizenship as uneven and exclusive | 201 |
| | Reflections: sex, gender and the body politic | 206 |
| | Registering identities, regulating bodies | 212 |
| Chapter Nine: | Inventing (Comm)unity: Place, space and identities | 214 |
| | Locating communities in narratives and in time | 217 |
| | The politics of ‘here’ and ‘there’ | 222 |
| | The politics of ‘us’ and ‘them’ | 228 |
| | The politics of ‘crossing’ and ‘passing’ | 239 |
| | The politics of ‘gender’ and ‘biology’ | 244 |
| | The ‘imagined’ transgender community | 248 |
| | Images | 251 |
| Chapter Ten: | Placing narratives in space and time | |
| | Conclusion | 259 |
| | Place and space | 260 |
| | Locating stories in time | 262 |
| | Narrativity | 263 |
| | Corporeality | 264 |
| | Agency | 266 |
| | Narratives of gender and practiced embodiment | 267 |
| | Research Appendix | 269 |
| | References | 278 |

List of Figures

| | |
|---|-----|
| Figure 1. Safe Sex Pamphlet. | 251 |
| Figure 2. Newtown Gym | 252 |
| Figure 3. More Drama Queens | 253 |
| Figure 4. Eat Drink and BE <i>Mary</i> | 254 |
| Figure 5 . Telstra Advertisement | 255 |
| Figure 6. Holeproof Underdaks Advertisement | 256 |
| Figure 7. Taxi Club Advertisement | 257 |
| Figure 8. Wizard of Id | 258 |

Mutable bodies constructed genders:

An introduction

Gender, not religion, is the opiate of the masses.
Erving Goffman (1997 [1977]: 203)¹

Of all forms of “hidden persuasion”, the most implacable is the one exerted,
quite simply, by the *order of things*.
Pierre Bourdieu (Bourdieu and Wacquant, 1992, 168 italics in
the original)²

On sex and gender

How are sociologists to make sense of sex and gender? At the turn of the millennium, understandings of sexual difference are the subject of considerable historical, medical, cultural, linguistic and academic uncertainty. Historical and cross-cultural diversity (Bullough, 1976; Kessler and McKenna, 1978; Laqueur, 1987, 1990; Martin, 1987; Herdt, 1993; Lorber, 1994; Nicholson, 1995; Connell, 1995; Hood-Williams, 1996; Lindemann, 1997) in the configuration of gender categories and identities has significantly challenged the notion that Western binary categories associated with sexual difference are natural and not subject to change. Public narratives³ and common-sense understandings of sexual difference frequently confuse and disrupt academic and scientific distinctions between sex and gender (Pringle, 1992: 89; Nicholson, 1995: 39; Haraway, 1991: 130; Scott, 1999, 71). Attention to hormones and genetics within medicine has blurred the categories and boundaries of physiological gender determination so that there appears to be as much variation

¹ From ‘The Arrangement Between the Sexes’.

² From ‘An Invitation to Reflexive Sociology’.

³ Public narratives transcend the individual; they are the cultural stereotypes that exist in the wider communities of interpretation through which stories circulate (Somers, 1992, 1994; Plummer, 1995). Public narratives are discussed further in Chapter Two.

within the categories of male and female as there are differences between them (Esptein, 1990; Fausto-Sterling, 1993; Garber, 1992: 106; Lorber, 1994; Cream, 1995; Hood-Williams, 1996; Connell, 1999). Confusion in the use of sex and gender (Scott, 1999: 71-72), and the multiplication of biological categories of sexual difference within medicine (Butler, 1990; Fausto-Sterling, 1993), parallels changes in academic thinking about sex and gender as the post-structuralist turn in the humanities calls into question old certainties associated with biology and identity.

Post-structuralist theory posits that the categories of sex and gender are discursively produced and legitimated through the oppositional relationship that is constructed by the respective alignments of sex and gender with nature and culture.⁴ Sex, or biological differences between women and men, is a product of scientific and cultural understandings about the relationship between anatomy and social gender. Donna Haraway (1991: 134), for example, argues that 'biology has tended to denote the body itself rather than a social discourse that is open to intervention'. Haraway (1991: 134) argues that feminist scholarship needs to critically interrogate 'how bodies, including sexualised and racialised bodies, appear as objects of knowledge and sites of intervention in 'biology''. Judith Butler also argues that sets of understandings about sexual difference are constructed through a complex set of circular relationships between the body, sex, gender, heterosexual hegemony and language. Following Foucault, Butler (1990: viii) explores the way that sex, like gender, is culturally constructed through the 'effects of institutions, practices and discourses'. For Butler the cultural construction of sexual difference means that the representation of biological sex as foundational, natural and inevitable is no longer tenable. Moreover, Butler (1990: 7) argues that 'the distinction between sex and gender turns out to be no distinction at all'. More recently, in the contemporary Western world, transsexual and transgender bodies and identities further complicate linguistic, medical, cultural and

⁴ Historically feminists have understood sex to be foundational, while gender is said to be culturally produced (Lindemann, 1997: 73). Simone de Beauvoir (1953: 19), for example, argued that the division of the sexes is explained as a biological fact because it did not occur as the result of a known historical event. According to this view, *sex* refers to biology, anatomy, hormones and genetics. Biological *sex* forms the basis for differences between males and females. *Gender* refers to social and cultural distinctions between men and women (Bourdieu and Wacquant, 1992: 172; Nicholson, 1995: 39-41; Hood-Williams, 1996; Hawkesworth, 1997: 650; Aalten, 1997: 45; Witz, 2000: 2-4). These differences mark bodies in terms of body shape, appearance, dress and ways of moving about in the world (Bourdieu, 1977; Bartky, 1988; Bordo, 1993a, 1993c). Biological sex is understood as a base on which gender is constructed. The location of sexual difference in biology, which is understood as linear, universal and transhistorical, enables an explanation of social differences between the sexes in terms of 'natural' and therefore unchangeable human behaviour (Game, 1991: 33; Vance, 1992: 132).

academic meanings and categories associated with sexual difference. Despite these challenges, the durability of sex and gender categories is apparent in contemporary Western societies which continue to privilege two sexes and two genders.

Epistemological challenges to the meanings and categories associated with sexual difference provided the context for this project. In 1995, when I began work on aspects of transgender embodiment, I was interested in how the lines of connection between anatomy, social gender and (hetero)sexuality are challenged and maintained. The politics of transgendered lives provided an ideal site for an analysis of those connections. As a previously lesbian-identified female-to-male transgender friend commented recently: *“Forget homophobia! Gender discrimination is something else”*. My friend’s exasperated comments refer to his experience of the assumed naturalness of binary gender categories in everyday locations which obliges transgendered people to ‘pass’ as normatively gendered in order to avoid verbal and physical harassment (Namaste, 1996a: 226). Why are identities that do not take the biological body as their ontological basis so threatening to so many people? How was I to understand and represent the experiences of transgendered people who participated in the research? In what ways are the narratives of people who identify as transsexual or transgendered consistent with contemporary feminist theories about sexual difference? This thesis presents a partial response to these questions.

A study of transgender embodiment provides a unique vantage point from which to examine why gender categories have proved enduring and persuasive despite the challenges outlined above. This thesis examines how gender is crafted in the day-to-day practices of those with transgendered bodies. It explores how conversations about identity, in transgendered social spaces, are also discussions about the medicalisation of sex and gender and the social/institutional expectations associated with particular gender identities. Discontinuities between the anatomical bodies and social identities of transgendered people call into question conventional understandings about bodies and selves. At the same time, people who use gender reassignment technologies attach considerable authority to normalising discourses about bodies and identities, masculinity and femininity. Individuals whose experiences embody these contradictions provide an opportunity for the analyses of subjectivity, agency, citizenship and community offered in the thesis.

A central theme within the thesis is the way personal narratives about transgender embodiment may be brought into conversation with both sociological and feminist post-structuralist theories about agency, corporeality and subjectivity. Stories, contexts and bodies are important to the representation of a gendered self. Holding ‘public stories’ and the particularistic features of narratives in play, I argue that both stories and identities emerge from interaction - shifting and changing according to the spaces and times in which they are embedded. Attention to the situated dimensions of social interaction suggests that it is not just discourses, but also corporeality and spaces that make certain subject positions available to actors. The liminality (Urry, 1990; Turner, 1979; Bowie, 2000)⁵ of people who identify as transsexual or transgendered allows them to reflect on the social construction of gender identity. Rather than being an exception to binary notions of gender, transgender narratives are able to illuminate the complex interaction between bodies and gendered conventions. It is therefore possible to see transgender bodies and identities, not as peripheral to binary notions of gender, but as examples of how gender identities come to be codified, constructed and crafted through the everyday practices of individuals.

At the core of the thesis are conversations with twenty-four people who craft sexed identities⁶ while occupying bodies that disrupt conventional expectations about anatomy and social gender.⁷ My interest is in exploring the tacit social agreements involved in common-sense understandings of sexual difference that are articulated by people for whom sex and gender categories are problematic. This research has focused on what Howard Becker (1998: 214) refers to as “looking for exceptions” and “looking

⁵ Bowie (2000: 168) defines liminality as ‘the middle stage of a rite of passage; anti-structural, ambiguous, creative’. Turner (1979: 234-235) identifies the following characteristics as typical of liminality - a blurring of the boundaries between male and female; the use of ordeals and humiliations that symbolize the ‘process’ of ‘transformation’ that is marked by a transition between opposing states - the having been and the becoming. These characteristics may also be applied to people who transition across binary gender categories.

⁶ Sexed identities refers to sets of understandings about lines of connection between anatomy and social gender.

⁷ The thesis draws on the stories of twenty-four transgendered research participants living in Christchurch, New Zealand and three Australian cities during 1996 and 1997. Interview material from these different research sites is included in most of the thesis chapters. Chapters Eight and Nine are based solely on interviews with people living in New South Wales, Australia. New Zealand participants were obtained through personal contacts. Australian participants were recruited through email, advertising, leaving copies of the information sheet at the Gender Centre, and attending social gatherings and conferences. Contacts with potential participants were also made through research participants who arranged introductions to other people who agreed to participate in the research. The research process is discussed in detail in Chapter Three.

for things that don't fit". In this regard, the thesis is not meant to 'represent' the experiences, discourses and practices of people who identify as transsexual or transgendered. Instead of generalising from my interview material, I use specific pieces of interview text to think through theoretical and cultural understandings about sex, gender and transsexualism that are manifest in feminist analyses (Raymond, 1980; Butler, 1993; Hausman, 1992; 1995), medical discourses (DSM-IV, 1994; McConaghy, 1993) and common-sense understandings about sexual difference. This approach to investigating the complexity of sexual differences involved pursuing a qualitative, interview-based research project.

Stories are specific to a particular time and place. My immersion in particular social and geographical contexts provided access to the insights relating to sex/gender, agency, selves and community that are presented in this thesis. Three events framed the narratives of the Australian people who participated in this study. The first of these events was the passing of the Transgender Anti-Discrimination legislation in June 1996. This legislation allowed post-operative transsexuals born in New South Wales to change the sex designation on their birth certificates. It also gave all people living in New South Wales who transition across binary gender categories legal redress against discrimination in important areas such as employment and housing. Second, on-going political debates in the 'transgender community' were also a significant feature of context that I encountered in Sydney in 1996/97. Differences of opinion over the use of state-funded resources for transgendered people, criticism of the medical model of transsexualism, political divisions between those who identified as transsexual and those who claimed identities as transgendered, and critiques of the construction of sex and gender as natural and ahistorical were a feature of these debates. Third, the month long Sydney Gay and Lesbian Mardi Gras in February was also important to the way that the people I interviewed defined themselves in relation to other people who transgressed binary gender categories and to the gay and lesbian community more generally. The outcome of my observation and experience of this context is represented in Chapters Eight and Nine of the thesis.

Getting started

From 1993-94 I carried out research for a Masters thesis on cosmetic surgery. During an interview with a plastic surgeon in 1993, he talked at length about gender reassignment surgery. At the time I was astonished by the way in which cultural understandings about gender were imported into the 'scientific' narrative of this medical professional and I thought that this could be a possible topic for a doctoral thesis. An extract from this narrative is reproduced below:

I'm the one who does that (sex reassignment) surgery. In fact, we have a team of people, and a very strict protocol. A patient who is transsexual does not choose to be transsexual. In order to be a straight female or male you have to have about five things lined up properly, genetic sex you have to have right. In other words, you have to have XX or XY chromosomes, and you can have all sorts of permutations and combinations of those axons - you can have XX, XXY, XYY and all these sorts of things. So you have to have genetic sex lined up properly. The next one is anatomic sex, which has to be lined up. In other words you have to have the gonads and you have to have either ovaries or testicles, then you have to have hormonal sex lined up, the gonads that you have need to start working and producing the female hormones and the male hormones. The next one is sex of up-bringing, a woman can have five boys for example and she has always wanted a girl, and the sixth boy she brings into the world she determines to dress him as a girl and she gives him dolls to play with and brings him up as a girl. Sometimes anatomic sex is not very determined and you can have a tiny little penis for example and a big bulbous scrotum, which looks like a labia. So the obstetrician/gynaecologist as the baby is being born, oh it is a girl, and in fact it can be a tiny penis and the scrotum sacks that look like the labia and here you are it is actually a genetic male brought up as a girl because they actually make a mistake when they glance at it quickly. So sex of up bringing can either be a woman's desire or a proper mistake. Then you have to have psychological sex. So a person can actually have the external habits of a male but actually feel that he is female, so you can have a male body and actually mentally feel that you are a female locked in a male body. All these things have to be lined up in order to be straight. So you can see why we have all these grey areas can't you.

Plastic Surgeon, 1993

In another part of the interview the plastic surgeon outlined the criteria for acceptance by the 'gender dysphoria' team with which he works. The criteria indicate that the clinical team follows the guidelines for diagnosis and management of transsexualism outlined in standard psychiatric and medical textbooks on transsexualism (see Money and Walker, 1977; Stone, 1991; DSM-IV, 1994; McConaghy, 1993; Lewins, 1995). In the plastic surgeon's narrative medicine and

psychology operate as regulatory practices that construct transsexual identity as pathological and in need of medical and/or psychological intervention. Instead of defining and specifying the relationship between sex and gender, this narrative blurs the categories and boundaries of physiological gender determination (Garber, 1992, 106; 1993: 332). As biological markers of sex fragment, gender identity as a psychological concept replaces physiology as the basis for determining gender. Clinicians with an interest in the sex determination of infants or in transsexualism have to attend to genital morphology, gonadal/hormonal, chromosomal and social markers of 'sex'. The medical discourse of this plastic surgeon draws on contradictory understandings of gender as based both in corporeality (endocrinology and physiology) and in the way identities are learned through socialisation and signalled through gender-marked behaviours and appearances.

A literature review quickly ascertained that a range of people were already involved in critically interrogating understandings about sex and gender in scientific texts and medical practices relating to transsexualism (Raymond, 1980, 1994; Billings and Urban, 1982; King, 1987; Epstein, 1990; Stone, 1991; Garber, 1992, 1993; Hausman, 1992, 1995; Cream, 1995; Hale, 1998).⁸ According to this literature, the production of surgical technologies and the psychological discourses associated with gender reassignment technologies are not independent of the cultural processes through which understandings about sex and gender are embedded. Both transsexual identity and gender reassignment technologies have their origins in medicine's 'discovery' or 'invention' of transsexualism.⁹ Dave King (1987: 356-358), for example, argues that the medical concept of transsexualism is based on patriarchal definitions of masculinity and femininity. It involves the individualisation of a social problem that deflects attention away from the political origins of transsexualism as an extension of the commodification and rectification of the body within late capitalism. Within this analysis any person who identifies as transsexual and/or pursues sex reassignment surgery is conforming to the hegemonic relations of medicine, capitalism and patriarchy.

⁸ For a comprehensive history of the medicalisation of hermaphroditism and intersexed individuals see Julia Epstein (1990) 'Either/Or-Neither/Both: Sexual Ambiguity and the Ideology of Gender'.

⁹ The term transsexualism was first used by Harry Benjamin at a lecture to the New York Academy of Medicine in 1953 (Raymond, 1980: 4; King, 1987: 353).

Bernice Hausman (1995) and Marjorie Garber (1992) trace the importance of surgical technologies and psychological discourses to the construction of contemporary understandings of transsexualism. They argue that plastic surgery introduced a specific medical culture that is central to the emergence of transsexualism in the twentieth century. Cosmetic surgery defines the body as a plastic and malleable commodity through offering elective surgical solutions to specific problems of body shape and form. Hausman (1992: 285) suggests, for example, that the development of cosmetic surgery sets a precedent for 'the establishment of surgical "therapy" for psychological problems focused on the body'. At the same time, the medical/psychological discourses and practices associated with transsexualism involve seeing the preoperative transsexual body as problematic – as an 'abnormal' body with the 'wrong genitals' which must be brought into tune with the mind, subjectivity and social identity of the transsexual subject. For both Hausman and Garber (1992: 106; 1992: 332), understandings of transsexualism as a surgically rectifiable problem are a product of cultural, social and psychological processes.

The cultural basis of transsexuality is also indicated in the medical discourses surrounding gender reassignment technologies which tend to be based on heterosexual-sociality (Smith, 1990: 191).¹⁰ One reading of transsexuality is that it is embedded in the sex/gender system¹¹ which is the product of intersections between technologies of the body and ideological systems. The medical discourses and practices attached to gender reassignment technologies may be seen as a discipline of the body and a form of knowledge/power based on the reconstruction of vaginas and penises to fit heterosexual expectations about gender and sexuality (Hausman, 1992: 297). Within this analysis the emergence of transsexualism lies in specific material practices and technological possibilities of physical transformation associated with sex reassignment (Hausman, 1992: 274). These practices and possibilities are developed through medical techniques of surveillance and examination, while surgical technologies may be interpreted as 'mechanisms' for the transformation and sculpting of bodies and identities. Like cosmetic surgery clients, transsexuals are often constructed as victims of the sex/gender system and as 'cultural dupes' who collude

¹⁰ According to Smith, heterosexual-sociality refers to the way many of the discursive practices of femininity 'interpret women as producing themselves for men as extensions of men's consciousness and as objects of men's desire' (Smith, 1990: 191-192).

¹¹ Drawing on Teresa de Lauretis' notion of gender technologies, Hausman (1992: 273) defines the sex/gender system as 'the sum of practices through which sex and gender are produced as biological and social/psychological counterparts within the subject, in the context of the subordination of women and the hegemony of heterosexuality'.

with doctors in the medicalisation of the body, in general, and transsexualism, in particular (Hausman, 1992: 273-274; Cream, 1995; Lienert, 1998). This analysis of transsexualism is unable to account for the active agency of transsexual subjects who may be critical of these technologies and/or perceive them as simultaneously constraining and enabling.

A review of the literature indicated that feminist, sociological and transgender critiques of the medicalisation of transsexualism¹² were already well established and that, in pursuing this line of inquiry, it would be difficult to make an original contribution to the existing literature. I needed to find another way to engage with this topic. My attention was drawn to the construction of transsexual subjects in the academic literature. I noticed some interesting parallels between this literature and feminists' constructions of women using cosmetic surgery (Morgan, 1991; Davis, 1991; Bordo, 1993a, 1993c; Wolf, 1990). I began to think about a thesis that looked at connections and differences between cosmetic surgery and gender reassignment technologies. When I began the thesis I was interested in issues associated with the knowing subject, agency and corporeality. I was also intrigued by the deployment of oppositions between natural and 'artificial' bodies in feminist analyses of the elective surgical/hormonal alteration of the (female) body (Wolf, 1991; Morgan, 1991; Coney, 1991). Ideas for the citizenship and community chapters emerged out of material gathered throughout the research process itself. During the course of my research I came to understand that it is not the meanings of sex and gender that are at stake, but the way in which the construction of such definitions involves the mobilisation of particular resources, actors and networks. All of these ideas eventually found their way into the thesis in its final form.

¹² For critiques of the medicalisation of intersexuality see Epstein, 1990; Butler, 1990; Fausto-Sterling, 1993; Chase, 1998; Dreger, 1998; Hird and Germon, 2001. Intersexuality is discussed further in Chapter Four. For discussions of transsexualism see Raymond, 1980; Billings and Urban, 1982; Stone, 1991; Garber, 1992, 1993; Butler, 1993; Hausman, 1992, 1995; Nataf, 1996; Namaste, 1996b; Devor, 1997; the 'Transgender Issue' of the *Journal of Lesbian and Gay Studies* (GLQ) 1998, vol. 4, 2; Halberstram, 1998; Hale, 1998. The medicalisation of transsexualism is discussed further in Chapter Seven.

Retracing the analytic agendas

My conversations with people who identified as transgendered or transsexual were informed by a desire to take seriously the knowledges and agency of people who engage with the possibility of using medical technologies such as hormones, breast implants, mastectomy or genital surgery to craft gendered bodies. This involved exploring how research stories are co-produced through interactions between the researcher and the people who participated in the study. The talk of research informants, and my responses to it, introduces some of the methodological issues that I was interested in addressing in the thesis. They concern not only the way informants may be viewed as both theorists and experts in their own lives and realms of experience, but also how this orientation to research reworks who is knower and who is known in research contexts, and the questions of agency that such an orientation to research invariably produces. The thesis is set in the context of an on-going discussion about the often complex relationship(s) between the actual processes involved in doing sociological research and how we as sociologists write about, interpret and understand the groups of people we choose to study (Bourdieu and Wacquant, 1992; Becker, 1998; Goffman, 1997 [1977]; Bloom, 1998).

I was increasingly dissatisfied with the way that I had used ‘agency’ uncritically in my earlier work on cosmetic surgery. To counter understandings of women as cultural dupes, I had emphasised the agency and knowledgeability of women who chose to engage in cosmetic surgery (Phibbs, 1994). Following Davis (1991), agency was thus deployed as a critique of feminist analyses of cosmetic surgery that implicitly constructed women as ‘victims’ or ‘cultural dupes’ of the cosmetic surgery establishment. In my doctoral thesis I wanted to situate a similar construction of agency within recent theoretical debates in sociology (Granovetter, 1985; Emirbayer and Mische, 1998) and feminist philosophy (Davies, 1991, 1997) about the meaning of the term, and to explore the implications of these different interpretations of agency for understandings about embodied social action. This involves recognising agency as a theoretical construct which is contestable. These concerns are developed in Chapter Six of the thesis.

My work on cosmetic surgery focused on the way femininity is understood, reproduced and transformed by people who engage in these practices of transformation. Minimal attention was paid to the way that corporeality may inform choices and shape action. In the intervening years I had become increasingly dissatisfied with the way that individual experience of the messy materiality of bodies was sometime neglected in social constructionist approaches to agency and subjectivity.¹³ Alison Jones (1997), for example suggests that identities are shaped through and by the culturally specific meanings associated with the particular structural categories (gender, class, sexuality, race, and occupation) that a person happens to occupy. As a result, '(t)he real embodied individual is largely irrelevant to the performance' (Jones, 1997:268). Drawing on the work of Arthur Frank (1995, 1996), and other people writing within and from the experience of disability and/or illness (see Williams and Bendelow, 1998), I wanted to look at the way physical bodies impinge on action and shape identities. I was unsure about how I was actually going to address these issues, but I hoped that conversations with transgendered people would provide some insight into the way bodies impact on action and therefore provide some way forward in this debate. I was fortunate to interview two people who explicitly talked about how their bodies had forced them to attend to gender identity issues, and one person who used their¹⁴ ambiguous body in order to challenge binary understandings of gender. While I acknowledge that these are exceptional stories, their very existence illuminates how bodies and selves are co-implicated in the construction of gender identities. Conventional or unproblematic bodies are less likely to facilitate thought about this relationship. Our attention may be drawn to the body as 'other' in times of illness or pregnancy (Frank, 1995, 1996; Young, 1990; Balsamo, 1996; Longhurst and Johnston, 1998), but this is seen as an exception rather than an indication of this very close yet silenced relationship.

I was interested in the way that ideas about 'natural' and 'artificial', 'normal' and 'abnormal', bodies are articulated in medical discourses, feminist analyses and the talk of research participants. Medical discourses surrounding transsexualism construct an individual's original gender identity as 'unnatural', their intermediate subjectivities as 'abnormal' and surgical intervention as necessary to restore them to the normality of

¹³ See Witz (2000), Williams and Bendelow (1998), Davis (1997), Frank (1996) who also share aspects of these concerns about 'the body' in social theory.

¹⁴ I acknowledge that the combination of the singular 'person' and plural 'their' in this sentence is unusual. Third person plural is often used in this way by transgendered individuals who do not wish to identify as male or as female. See Norrie May Welby's discussion of personal pronouns in Chapter Five.

their ‘natural’ selves (Money, 1977; DSM-IV, 1994; McConaghy, 1993; Lewins, 1995)¹⁵. These ideas are shared by many people who identify as transgendered. Some feminist and sociological analyses also strategically deploy natural/artificial oppositions to critique the artificial (and unnatural) construction of bodies through surgical alteration (Morgan, 1991; Garber, 1992; Hausman, 1995; Connell, 1995). According to this view, scientific discourses and medical technologies subjugate, exploit and oppress the ‘natural’ and ‘normal’ body (Morgan, 1991: 41). I argue that it is too simplistic to assume that debates surrounding medical technologies for crafting gender, and their construction of the body as a plastic and malleable commodity, may be resolved by privileging the ‘natural’ culturally constructed body over the artificial surgically altered body (Garber, 1992). The deeply embodied nature of transgender stories suggests that post-structuralist theories about how identity categories may be deconstructed (Davies, 1991; Davies and Harre, 1990) must be held in tension with the ways in which essentialist understandings of identity are used by individual actors. I argue in Chapter Six for a more complex analysis of agency and subjectivity that explores how embodiment as well as discourses and practices are co-implicated in the construction of identity.

The individual stories presented in this thesis connect to debates in transgendered communities and to the more general project of exploring the broader analytic agendas of the thesis. Personal stories provide constructed accounts of how particular individuals pursue their own construction of identity through fields of knowledgeability. The narratives of transgender people provide a site in which to explore issues associated with embodiment, identities, post-structuralist and essentialist/modernist theories and conceptualisations of persons. Chapters in the thesis separate out what is occurring simultaneously in local and national settings. Sociology entails an analysis of multi-dimensional networks where all of these things are in play. Attention to these particular narratives and forms of embodiment allows me to explore existing theories – and to set up an analysis of sex and gender through its embodied, physical, state and institutional forms.

¹⁵ Also see the edited collection by Walters and Ross (1986).

Thesis overview

The thesis is presented as a series of inter-related essays which may be read as stand-alone pieces. These essays engage with key substantive areas within sociology – narrativity, methodology, biography, performativity, agency, corporeality, citizenship and community. The analysis progresses from consideration of the micro politics of situated lives to the macro politics of state and national contexts. In each of these chapters the relationship between the local achievement of transgender identities and the substantive theme of the chapter is developed. The thesis draws on the work of two or three theorists in each chapter; it does not attempt a comprehensive review of the literature in each of these areas, but illustrates themes at work in this field through extracts from conversations with, or the narratives of, people who are identified by themselves or others as transgendered.

The thesis has a logic that moves from detailed attention to one life story to analysing a variety of stories, conversations and political actions in a regional and community context. The analysis of the interview material begins in Chapter Two with a consideration of the micro politics of interpersonal social interaction at the hairdresser and in a beauty salon. This chapter draws on Margaret Somers' (1992; 1994) arguments about the narrative construction of identity, Bronwyn Davies and Rom Harré's (1990) discussion of 'positioning' and Ken Plummer's (1995: 22) assertion that stories emerge from interaction, shifting and changing according to the contexts in which stories are told and heard. I argue that the unstable identities Somers discusses are predicated on relatively stable, but sometimes problematic, narratives. I incorporate into Somers' concept of narrative identity an analysis of the destabilising, temporal, spatial and relational aspects of narratives. Transgender narratives about gender identity are shaped by the particular characteristics of the contexts in which they present themselves. I argue that it is not just discourses, but also corporeality and spaces that make certain subject positions available to actors. It is the particularistic, socially and spatially situated narratives that are the subject of discussion in this chapter. Ideas about 'narrativity' and 'positioning' outlined in Chapter Two are continued in Chapters Three and Four where I explore the politics of knowledge production through attention to the contexts in which research narratives are co-produced, reproduced and consumed.

Chapter Three combines key methodological themes with a discussion of the research on which the thesis is based. I explore the way research stories are co-produced through interaction between the researcher and the people who participated in this study. I consider methodological debates that privilege women and/or gender as the subject of feminist research and reflect on these debates in relation to my position as a woman interviewing people who have been and are both male and female. Methodological themes are continued in Chapter Four where issues associated with doing and presenting life stories are discussed.

Chapter Four also introduces a wider temporal and spatial frame. Robyn tells an incredible story about how her body ‘changed gender’ following an accident. Robyn’s story was told to me in private and with the condition that I ensure Robyn’s anonymity in the thesis. In this chapter several of the major threads in the thesis are introduced – issues associated with language, subjectivity, agency, embodiment, gender, biography, and methodology. Robyn’s life history provides the context through which an argument is made about the relationships between biography and public narratives of medicine, sex and gender. Robyn defines herself as someone who, and inhabits a social world in which s/he, constantly moves from one gender to another; physically, psychologically, linguistically, socially and symbolically. As a result, Robyn’s narrative is a destabilising one that constructs an identity that is shifting and contingent. Robyn’s story goes to the heart of the issues that I am interested in exploring in the thesis. It highlights how identities are both socially constructed and rooted in essentialism. A core focus is on the way medical technologies, discourses and practices powerfully influence sets of understandings about the relationship between anatomical sex and social gender. This chapter also examines how the stories of people who have experienced discontinuities between their anatomy and social gender both conform to, and disrupt, sets of understandings about the relationship between anatomical sex and social gender. Rather than being an exception to binary notions of gender, Robyn’s narrative clearly illustrates how gender identities come to be codified, constructed and crafted in the everyday practices of individuals.

The fifth chapter of the thesis is based on an interview with a transgender performance artist. Norrie May Welby is out and proud as a transgender activist. Welby’s real name is used throughout the thesis at his/her request. Welby’s narrative

articulates a social model of transgenderism that provides an opportunity to engage with the sociological concepts of *habitus* (Bourdieu, 1990) and field (Bourdieu and Wacquant, 1992) and post-structuralist theories about the performativity of gender (Butler, 1990). Welby appears again in Chapter Nine where his/her political activism is the focus of attention. Detailed attention to a conversation with Norrie May Welby provides an opportunity to explore the transformative potential of unauthorised and challenging gender performances. I argue that the subversive meanings associated with Norrie May's gender performances are dependent upon differences that are defined in relation to the conventional and the ordinary. In this regard, transgender performances simultaneously embody traces of the unruly associated with incoherent gender identities and the normative associated with conventional gender identities. I analyse the subversive and conventional elements in the talk of research informants on performing and 'doing' gender. Norrie May's post-structuralist account of gender as multiple, fluid, shifting, contingent and contradictory also rests on a notion of an embodied choosing (Enlightenment) subject.

Attention to choosing involves engaging with agency. The 'problem' of individual agency informs the analysis of agency and constraint in Chapter Six and the comparative analysis of gender reassignment technologies and cosmetic surgery advanced in Chapter Seven of the thesis. These chapters explore the need for a more complex analysis of agency and subjectivity that explores how bodies, technologies, discourses/narratives and practices are co-implicated in the construction of identity by research informants. Chapter Six considers the relationship between agency, corporeality, narrativity, selves and technologies through the local achievement of identities. Connections and differences between liberal humanist and post-structuralist theories of agency are explored. I am interested in how people who transition across binary gender categories draw on and utilise ideas about action that may be identified with these contemporary social theories of agency and identity. How embodiment impacts on the discursive positioning of subjects, and the constitution of subjectivity, is also explored in this chapter. Most people do not consciously think of themselves as 'doing agency' nor do they recognise the way that their identity is constructed through interaction, discourse or via biology. Some of the people who participated in this research did talk about agency in language that may be identified with a theoretical positioning, and/or talked about their conscious location in discourses and practices surrounding masculinity/femininity. These people were actively engaged in crafting their identities and, at the same time, recognised the constructedness of gender in their

own practices and in the practices of non-transgendered others. It is the active and embodied constitution and reconstitution of identities that are simultaneously historical, relational and corporeal that is of interest in this chapter.

Chapter Seven considers similarities and differences in the use of medical technologies between women who engage in cosmetic surgery and people who use gender reassignment technologies. The marginality of transgender people, their experience of maintaining a particular gender identity while occupying a body that is differently sexed, and the attractions of a body in which gender and anatomy are consistent, contributes to narratives that are a rich site for an exploration of agency. Another theme that is developed in Chapter Seven, and runs through the thesis more generally, is a consideration of the way that corporeality is important to the representation of a gendered self. Identities are the deeply embodied outcome of a complex interaction between narrativity, corporeality, culture and subjectivity. Transgender identities are managed in the context of occupying bodies that confound conventional discourses associated with sexual difference. This lack of fit between embodiment, subjectivity and 'ordinary' discourses about sexual difference as immutable suggests that identities are not simply a product of discourses and social practices. In short, bodies matter and they matter most when they are experienced or defined as problematic in some way. I argue that it is not just discourse, but also corporeality and spaces that make subject positions available to actors.

Chapters Eight and Nine explore the collective agency of social groups. The achievement of the New South Wales Anti-discrimination legislation, discussed in Chapter Eight, is an example of the outcome of collective agency. Political action within the gay, lesbian and transgender community is also the subject matter of Chapter Nine. Discussions of controversies over the construction of sexed identities in these chapters link to analytic agendas associated with the construction of identity, sex and gender in the academy. Chapter Eight begins with a mundane artifact - a piece of paper on which the perfunctory details of a person's birth/identity are recorded - and traces the complex network of relations that go into its production. The birth certificate is embedded in multiple overlapping networks. This chapter focuses on the Births, Deaths and Marriages register, the legislation governing this register for recording a change of sex in New South Wales, and the birth certificate itself. I argue that the Births, Deaths and Marriages register acts as a bridging device (Latour, 1995) between the birth certificate, the individual and the state. In Australia, state citizenship determines the

rules for recording sex at birth and for recognising subsequent gender identities. In New South Wales, surgery and reproductive non-functioning are important to the way that the state regulates or authorises transgendered bodies and identities. I argue that variations in 'change of sex' policies and practices within and between Australian states mean that administrative distinctions between male and female bodies are complicated by the corporeal diversity and personal histories of transgendered individuals. The legislation governing the Births Deaths and Marriages register, that allows the sex designation on the birth certificate to be changed, is a new instrument of bio-power (Foucault, 1978: 139-143; Sawicki, 1991: 67-68) and potential source of division and differentiation among transgendered people.

Division and differentiation among transgendered people is also the focus of Chapter Nine. This chapter provides an analysis of the way that unity, connection and boundaries within communities are actively constructed. It also explores how the groups established through these actions are simultaneously problematised and deconstructed through forms of political activism and identity politics in the Sydney transgender community. It outlines debates over the utilization of institutional resources that the transgender community have created. I problematise ideas about bounded communities by looking at the way identities are constructed in relation to broader social configurations that are not tied to place. Tensions surrounding the politicisation of identities within the inner city Sydney transgender community also point to the way social bonds, tacit understandings and political mechanisms operating within communities are open, contested and contradictory. At the same time, communities are 'imagined' (Anderson, [1983] 1991) through newspapers, posters, jokes, spatial symbols, public narratives, collective social rituals and shared times and experiences. The examination of these political processes leads to conclusions about the construction of imagined communities through difference, schism and unity. This final substantive chapter brings together, through an analysis of the construction of relational identities on different local and national scales, many of the themes discussed in previous chapters - narrativity, identity, corporeality, space and time.

The analyses presented in the thesis do not apply only to people who have transgendered bodies. They make a contribution to the literature on embodiment more generally. Arguments presented in the thesis about the way that subjectivity is constituted through a complex inter-relationship between language and embodiment also connect to current debates around theorising experience in the areas of illness and

disability (Frank, 1995, 1996; Williams and Bendelow, 1998; Parr and Butler, 1999). Throughout the thesis, I argue that it is not just discourse, but also times, spaces and bodies that make subject positions available to actors. Ideas about the narrative construction of identity are extended through consideration of the way that individuals negotiate everyday encounters, take up particular subject positions and resist others. This requires a critical engagement with the construction of agency and the agentic subject in social theory through attention to how people present themselves as knowing subjects in research conversations. If storied social action is the key to the production of identity, then the narrative identities of people who participated in this research were also shaped by their location in a particular temporal and spatial field where complex social and political redefinitions of sex and gender were in play. Transgender identities are produced and reproduced in the everyday actions of individuals as life stories, contingent circumstances, public narratives, community politics and state forms interact. The thesis is therefore a story about how identities are constructed through an exploration of cultural and political processes that are simultaneously personal, local, national and global.

Constructing identities

Narrativity, positioning, spaces

I began the process by telling a close friend at work.
 He – a young gay man.
 “Had he heard of transgender people?”
 His assumptions were logical.
 In trying to assure me of his friendship – he drew attention to the butch dykes seen around his area and mistaken for men. Eager words of continued support followed with examples of lesbian friends.
 My frustration grew. The closet was stifling.
 “But I’m not a lesbian” – I said as evenly as I could.
 “Oh”.
 I wave I never felt.
 A breath.
 “I see”.
 He pressed on with the conversation, struggling with my answers.
 I admired his determination.
 He – a cautious stumble of care and self-corrections. Still walking forward in such an unfamiliar landscape.
 Apologies.
 Starting and stopping.
 Hesitant now. Both of us.

 I told him how I felt ashamed of coming out and of my own self.
 I was afraid of losing his friendship.
 He said that any young boy coming out feels the same.
 He talked about how he hated living a lie.
 His stories of feeling separated and hidden – examples from his old jobs, family, friends and experiences.
 Our paths merging again – common ground now.
 We both relaxed.
 “Any young gay boy coming out...”
 In that space, I took a second breath.
 And another.
 Just like any young gay guy.
 Craig Andrews¹

I’ve arranged to meet Craig for lunch at Craig’s favourite restaurant. Craig was one of the first people that I interviewed for this research project and we have since become good friends. I listen to him recounting the events of the last week. Craig has only recently come out publicly as transgendered and gay. His colleagues are having problems accepting his male identity and things are pretty well becoming intolerable for him at work. A snide comment that a female supervisor made to him about shaving

¹ Unpublished poem, reproduced with permission from Craig Andrews.

is preying on his mind. He tells me that he can no longer bring himself to have lunch in the staff cafeteria and has instead taken to eating alone outside in the quadrangle. It is a poignant moment that conveys to me the lived reality of Craig's feelings of difference, isolation and rejection (Field notes, December, 1997).

The above field notes from my lunchtime meeting with Craig illustrate the politics of the spaces in which narratives, events, identities and experiences are at play. Craig experiences his work as a hostile space where his transgendered identity is barely tolerated. The place where Craig works is further divided into more or less threatening spaces, the informal atmosphere of the staff cafeteria being the most intimidating. These spaces require different enactments of self; at his workstation he is able to adopt a more impersonal professional demeanour, in the cafeteria a more personal relational self is required. Craig's work is a space in which narratives about transitioning across binary gender categories are not able to be expressed freely. The restaurant, where he is known and accepted as a gay man, is by contrast a place where Craig feels relatively safe and largely unconcerned about people overhearing our conversation. Craig's story highlights the relational and spatial aspects of personal narrative. This chapter examines the relationship between narrativity, corporeality, spaces and the process of story production.

Social life is storied (Somers, 1994: 614). Identities are not unitary or static. They are instead shaped by the narratives in which they are embedded (Somers, 1992: 1994). Narratives in turn are not unitary or neutral; they are shaped by the spaces in which they are articulated (Plummer, 1995). They are also constrained by the internal structures of language, the discursive production of selves in social interaction, and the politics of the spaces in which stories are expressed and received. This chapter brings together Margaret Somers' (1994) arguments about the narrative construction of identity, Bronwyn Davies and Rom Harre's (1990, 1999) ideas about 'positioning' and Ken Plummer's (1995) argument that stories emerge from interaction shifting and changing according to the contexts in which stories are told and heard. Through a discussion of Margaret Somers' ideas about narrativity and narrative identity I explore the destabilising spatial and temporal aspects of narratives. Holding 'public stories'² and the particularistic features of narratives in play I argue that both stories and identities emerge from interaction; they shift and change according to the spaces and

² Public stories are the narratives that transcend the individual; they are the cultural stereotypes that exist in the wider communities of interpretation through which stories circulate (Plummer, 1995: 22). Public stories may be local, national, or global.

times in which they are embedded (Plummer, 1995). Or to put it another way, narrative identities, like narratives themselves, are unstable, relational, temporal and spatial. I argue that Somers does not adequately explore the way that narratives are shaped by time, space and relationality. I incorporate into Somers' concept of narrative identity an analysis of the destabilizing, temporal, spatial, and relational aspects of narratives. I argue that stories, contexts and bodies are important to the representation of a gendered self. Bronwyn Davies and Rom Harre's (1990, 1999) work on positioning and subject position is used to explore how people orient themselves in relation to their experience of interactions, practices and public narratives embedded in conversational story-lines (Davies and Harre, 1990: 52). Transgender narratives about gender identity are shaped by the particular characteristics of the contexts in which they present themselves. I argue that it is not just discourses but also corporeality and spaces that make available certain subject positions to actors. It is the particularistic, socially and spatially situated narratives that are the subject of discussion in this chapter.

Narrativity: evolving stories, (e)merging identities

Social life is 'storied', the networks through which subjectivities are constituted may be traced through narrativity. Narrativity may be thought of as stories and action in relation to times, selves and settings (Plummer, 1995: 17-20). It is a social process and stories or narratives are crucial to that process. Somers (1994: 607) suggests that by tracing narratives it becomes possible to map the complex and contradictory means by which social relations are organised, made meaningful and maintained through complex inter-linkages within networks of relations which shift over time and space. She argues that narrativity is a social process that is embedded in four inter-related dimensions of narratives: ontological or personal narratives, public or cultural narratives, conceptual or theoretical narratives and meta-narratives such as the master narratives of historical explanation (Somers 1994: 618-619). Ontological narratives are the stories that social actors use to make sense of themselves and their relationship to the world. Transitioning across binary gender categories is an exercise in ontological narrativity. Transgendered individuals are able to construct narratives about themselves as people who have 'chosen' their gender - who have transitioned or are in the process of transitioning. People draw on ontological narratives in order to act in their lives. The ontological dimensions of narrativity bring certain people into being, they shape identities and selves; narrative identities structure choices and activities.

Story-actions in turn produce new narratives and hence new identities, politics and communities (Plummer, 1995: 152; White, 1992: 13-14). Identities are crafted, modified and abandoned, and particular courses of action followed, according to how people are located by and locate themselves, however temporarily, in a range of given narratives. Narrative identities are never complete; they are always in the process of being formed. In this sense they embed identities in an ever unfolding flow of temporally and spatially specific social relationships (Somers, 1992: 603; 1994: 618).

Ontological narratives are crafted out of existing stories that circulate in certain contexts. These public narratives transcend the individual; they are the cultural stereotypes that exist in the wider communities of interpretation through which stories circulate (Plummer, 1995: 22; Pahl, 1995: 151). Public narratives may be local, national, or global. The story of the ideal transsexual who always knew that they were of the other gender is a public narrative, or Western stereotype, that many transsexual people draw on in order to explain their identity to themselves and to others. An example of this narrative is provided in the following opening lines of Jan Morris's autobiography *Conundrum*:

I was three or perhaps four years old when I realized that I had been born into the wrong body, and should really be a girl. I remember the moment well, and it is the earliest memory of my life (Morris, 1974: 11).

Morris appropriates psychiatric discourses and public narratives about transsexualism in the story that she tells about her childhood self. Morris writes that she was 'born into the wrong body' and she locates her transsexual identity in her earliest memory - both narrative conventions that imply an immutable, pre-discursive or biological origin for her 'conundrum'. Morris's personal narrative about her unconventional gender identity is embedded in broader public narratives about sexual difference. Her narrative illustrates the way shared social narratives, such as those associated with public narratives of transsexualism, biology and gender, encompass both the individual and the collective, while personal narratives are defined in relation to the broader public narratives in which they are embedded. Narratives are simultaneously general and specific because they are both individually produced and embedded in shared understandings of the social world (Somers, 1994).

Norrie May Welby, a transgender activist interviewed for this project, is critical of dualistic understandings of sex and gender, and narrow media stereotypes of transsexuals such as those found in women's magazines, which impose limits on possible ways of being for 'transys':

...we live in a society that insists on the binary, and one that pushes these views of transys at us, you know "Women's Day", "I was a tortured transsexual and I could not wait until I had the operation to become a real woman..."

(Norrie May Welby, 1997)

Welby is critical of the limited range of public narratives associated with transsexualism in the print media – narratives that focus on immutable binary sex/gender categories, pathology, medical intervention and heterosexuality. Individuals who identify as transgendered often selectively appropriate public narratives about sex, gender and transsexualism in the stories that they tell about themselves. However, Welby's narrative indicates that social actors are not free to fabricate ontological or public narratives at will. In other words, to paraphrase a famous expression from Marx, social actors construct their narrative identities but not under conditions of their own choosing/making. There is 'only a limited repertoire of available representations and stories. Which kind of narratives will socially predominate is contested politically and will depend in large part on the distribution of power' (Somers, 1994: 630).

The limited repertoire of representations and stories means that certain unintelligible experiences, events and identities will not be accommodated easily within the range of available cultural, public and institutional narratives. The limited repertoire of stories that transsexuals may draw on in constructing narratives about themselves is illustrated by the uncertain status of gay identified female-to-male transsexuals. Amy Bloom (1994) discusses the case of Louis Sullivan, a female-to-male transsexual, who was also a gay man with AIDS. Before his death, Sullivan talked to the influential psychiatrist Dr Ira Pauly, in the hope of educating the professionals in the 'gender community' about the difference between gender and sexual orientation. The gender-dysphoria 'clinics rejected Sullivan, because he not only knew that despite his female anatomy he was male, he knew that he was a gay male' (Bloom, 1994: 42). In a video-taped interview Sullivan says:

They said, 'It can't be,' and I said 'It is... They told me that I must not really be transsexual. After all, they thought, if I just wanted to sleep with men, why go to all the trouble...' (Bloom, 1994: 42) .

The clinicians' failure to recognise Sullivan as transsexual, because of his sexual orientation, highlights the heterosexual assumptions held by most medical professionals involved in the field of sex reassignment. Sullivan's experiences are unintelligible in relation to psychiatric discourses surrounding transsexualism which assume a post-operative/non-operative heterosexual identity. Sullivan, however, also disrupts notions that all transsexuals are individuals whose commitment to expectations about heterosexuality as normative drives their attempts to change their gender identities.³ One reading of Sullivan's story is that he wanted to be transsexual in order to be gay. Sullivan adopts an either/or approach to physiological gender identity, but is comfortable with a transgressive sexuality.

Conceptual narratives are the macro-theories and analytic categories that sociologists use to make sense of social life. Somers (1994:620) argues for a temporal and relational conceptual narrativity, but says that most of the analytical concepts that sociologists use have actually been 'de-narrativised'. A narrative has been de-narrativised when it is abstracted from its conceptual origins. A classic example is the story of the progressive development of society from traditional to modern forms of social organisation.⁴ Public narratives that are so pervasive that their temporal and spatial origins are obscured are categorised as master-narratives or meta-narratives. Meta-narratives are the master narratives of contemporary social life, such as democracy and its binary opposite autocracy, capitalism/communism, individualism/collectivism. In the area of sexuality Foucault's eloquent deconstruction of the 'repressive hypothesis' (Foucault, 1978: 17-18) – that prior to the Victorian era sexuality was typified by 'primitive' sexual freedom while Victorian sexuality and discourses surrounding sex at that time were characterised by silences and prohibitions

³ See Chapter Five for further discussion of the relationship between transsexualism and heterosexuality.

⁴ Examples of the story of the progressive development of society may be found in Durkheim's theories about the relationship between the division of labour and the transition of society from traditional (mechanique solidarity) to modern (organique solidarity) forms of social organisation (Bilton, et.al., 1981: 699-702). Tonnies' concepts of *Gemeinschaft* and *Gesellschaft* also reflect this traditional/modern dichotomy. *Gemeinschaft* is associated with the 'natural', *Gesellschaft* with the 'rational' (Tonnies, 1957: 249). *Gemeinschaft* is a community of people who have close familial and/or social relationships. Within these communities there are simple types of economic exchange such as bartering. *Gesellschaft* is a society or class. It is characterised by the rise of individualism and the development of forms of economic exchange that involve contracting relationships between individuals for services (Tonnies, 1957: 250-259).

(Foucault, 1980: 3-4) - is another example of a meta-narrative that has been challenged (or re-narrativised) through historical analysis.⁵

The master-narratives associated with sexual difference have also been 'denarrativised' (Somers, 1992: 594) through their association with a naturalistic and ahistorical understanding of male and female. The location of sexual difference in a biology that is understood as fixed, universal and transhistorical, facilitates an explanation of social differences between the sexes in terms of the natural (Butler, 1990: 7). Contemporary meta-narratives surrounding sex and gender include the historical construction of woman as modified man. This model was eventually replaced by a construction of women as separate, unique biologically different beings, thus introducing a biological justification for the differential treatment of women legally and politically (Laqueur, 1987: 1-4, 1995; Martin, 1987: 27-32). Thomas Laqueur (1987: 1-4; 1995) argues, for example, that modern definitions of biological sex are not transhistorical; instead he amasses compelling evidence that shows how understandings of male and female bodies are context specific. In the early 1800s the homologous nature of the male and female body, including the reproductive organs, was rapidly replaced by a differentiated model whereby the bodies of women were defined in opposition to men. Laqueur (1987: 4; 1990: 152) argues that this process was not a result of increased scientific/medical knowledge, but rather a cultural development whereby differential representations of 'sex and gender became a critical issue of political theory and practice'.⁶ Laqueur renarrativises modern 'scientific' models of sexual difference by exploring their historical origins in medical diagrams, scientific texts and written public narratives of the time.

⁵ Foucault (1978: 4) argued that under the Victorian regime sexuality was not simply 'driven out, denied, reduced to silence'. Instead he suggested that from the 17th Century onwards there was a 'proliferation of discourses concerned with sex' (Foucault, 1978: 18). Sexuality was 'put into discourse' through the development of certain technologies of power and knowledge (Foucault, 1978: 11) – such as religious confession, sexology and the state administration of bodies. As such, Foucault (1978: 5) suggests that it is problematic to claim that contemporary sexual expression, characterised perhaps in the 'sexual revolution' of 1960s and 70s, is 'freer' than it has been in the past.

⁶ Laqueur states specifically that 'the context for the articulation of two incommensurable sexes was, however, neither a theory of knowledge nor advances in scientific knowledge. The context was politics... When for many reasons, a preexisting transcendental order or time-immemorial custom became a less and less plausible justification for social relations, the battleground of gender roles shifted to nature, to biological sex. Distinct sexual anatomy was adduced to support or deny all manner of claims in a variety of specific social, economic, political, cultural or erotic contexts.... Whatever the issue the body became decisive' (Laqueur, 1990: 152).

Meta-narratives or ideologies are often incorporated into the conceptual narratives of sociological theory – Progress, Industrialization, the Enlightenment (Somers, 1994: 619) – to name a few. Sociological concepts relating to economic change and the project of political ‘freedom’ are brought to mind in the binary oppositions associated with capitalism/communism and democracy/autocracy for example. ‘Concept’ implies a more static and fixed definition than ‘narrative’/‘narrativity’ which I use in this thesis to convey the situated, contingent and relational nature of stories and story telling. Or to put it another way, in relation to meta-narratives the word has been divorced from its contextual origins. For public and ontological narratives words and contexts are simultaneously in play. Although Judith Butler (1997: 14) would caution us that all words are subject to resignification, some words, such as ‘homosexual’ or in relation to this thesis ‘transsexual’, are so powerful that they carry their contexts with them; for other words, such as ‘gender’ or ‘transgender’ the meaning comes into play at the moment of their deployment (Butler, 1997: 13). The temporal and spatial origins of these conceptual narratives may be reintroduced by exploring the way that they are historically and relationally constructed through ontological and public narratives.

Transgender subjectivities are not easily accommodated within dominant public and institutional narratives of sexual difference. Sex and gender inconsistencies are ‘problems’ that are specific to individuals. ‘Renarrativisation’ (Somers, 1992: 595) involves exploring the historically and culturally specific origins and relational complexities of master narratives and the social scripts that they legitimate. Thomas Laqueur (1987: 6-11) reproduces anatomical sketches from the 15th to 19th Centuries which represent female genitals and reproductive organs as modified male organs. In this historical narrative female as modified male did not invoke the sharp dichotomous thinking that dominates contemporary thinking about sexual difference. Laqueur’s work renarrativises contemporary understandings about biological sex pointing out their specific social and cultural origins. Writing counter narratives that reflect variation and difference is also a crucial political strategy when identities are not expressed, or experiences represented, in the dominant public narratives. The multiple subjectivities, or non-unitary subjectivities (Bloom, 1998), of transgender people for example, which emphasise the situated, active, fluid and contingent nature of identities undermine the abstract, universal, rational actor typically embedded in the master-narratives of classical social theory (Somers, 1994: 633-635). Somers recognises how

some identities, experiences and events are othered by a limited range of dominant public and cultural narratives. But this is not the same as exploring the way that time, space and relationality destabilise narratives. I argue that stories, contexts, and bodies are important to the (re)presentation of a gendered self. This is demonstrated in the way that the ontological narratives of transgender people may be disrupted in social interaction – I will return to this point later. In the following section I draw on feminist theories about how the internal structure of language makes self representation difficult for women in order to suggest that transgendered people are also excluded from the linguistic signifying economy. Somers' arguments about denarrativisation and renarrativisation are considered in relation to the radical deconstruction of sex and gender as a political strategy among some transgender activists.

Language, meanings and stories

Language, traditions and the story-telling genre itself impact on the formation of both ontological and public narratives. Ontological and public narratives consist of meanings and categories through which people may also constitute their identities. As a result, feminist criticisms of the relations and processes by which meanings and categories are constituted through language are relevant to an analysis that considers the relationship between stories and identities. Narratives are comprised of meanings that reflect social/institutional inclusions and exclusions. In New Zealand and New South Wales, for example, the state legitimates heterosexual marriage and specifically denies gay couples the right to marry. Meanings that achieve relative internal stability may be referred to as definitions. Definitions create a hierarchy of knowledge among existing narratives; they distinguish between legitimate and illegitimate cultural representations. Paula Treichler (1990: 124) argues that definitions are formulated through a set of complex cultural processes whereby particular meanings become official and enter discourse in the form of a constructed definition. The meanings associated with sex and gender, for example, are constructed, codified, and institutionalised through the discourses and practices of the State, the medical profession and their transgender clients.⁷ Medical professionals define the rules for

⁷ I refer here to Hausman's (1995: 129) assertion that transsexuals have been 'actively engaged in defining their position within medical discourses' (see Chapter Seven). In New South Wales state recognition of transgender identities was achieved through forms of political activism within the gay, lesbian and transgender communities – this legislation is discussed in Chapter Eight.

recognising gender differences and the clinical characteristics of transgendered clients. Definitions contribute to understandings about the subject positions available to actors and the meanings we attach to particular social identities, experiences, events and practices. In Chapter Eight I discuss the legislation surrounding changing the sex designation on the birth certificate in New South Wales. This legislation is an example of the way that particular contested meanings associated with transsexualism are incorporated into the definition of sexed identity that is recognised officially by the state.

Some narratives carry more weight than others; Somers refers to these narratives as public narratives or traditions, Bloom (1998) uses the phrase 'master scripts' and Butler (1990) refers to these dominant narratives as 'normalising fictions'. Judith Butler (1990) argues that gender and heterosexuality are 'normalising fictions'. She is critical of the treatment of gender as a social construction of sexuality for the way it naturalises lines of connection between sexuality, gender and anatomy (Butler, 1990: 70).⁸ Women who have penises and men who have vaginas problematise the way in which language and knowledge associated with sexual difference are constituted through mutually exclusive binary oppositions. Their conventionally 'unintelligible' biology, combined with the lack of a suitable gender-neutral pronoun, reflects the difficulties of self representation for transgender people within language.

Feminist debates surrounding gender and narrativity also hinge on understanding how women are signified through language. Judith Butler (1990) argues that there are two major theories about the possibilities and difficulties of representation for women within language. The first follows a model of failed reciprocity in which women are defined through the identification of particular characteristics that are 'not masculine'. The second is based on the failed reciprocity model but foregrounds women's exclusion from the male (white, heterosexual, class based) signifying economy. Following de Beauvoir (1953: 15-16), the failed reciprocity model considers women as 'Other' to men. Only the feminine gender is marked, inasmuch as the feminine is defined through a series of exclusions that are based on everything that is 'not masculine'. The universal person and the masculine gender are conflated (de

⁸ In Chapter Eight I explore how the New South Wales Births Register naturalises lines of connection between gender and anatomy via the exclusion of intersexed individuals from marriage and through the surgical requirements within the legislation allowing individuals to change the sex designation on their birth certificate.

Beauvoir, 1953: 15-16). The masculine gender is marked through cultural signifiers of (hegemonic) masculinity that exclude alternative forms of masculinity – homosexuality for example. The universal person or social body is unmarked in ways that mask its original structural biases (masculine, white, heterosexual, able bodied). This model maintains the Cartesian split between mind/body, male/female, transcendence/immanence inasmuch as the masculine/feminine binary is predicated on maintaining rather than questioning these oppositions (Butler, 1990: 7-13).

The second model of unequal representation, often associated with the work of Luce Irigaray, takes as its base the major premises from the first model – the notion that women are “Other” to men. Within this model women are unrepresented and unrepresentable within the existing signifying economy because both the subject and the “Other” are masculine (Butler, 1990: 10-11). The signifying economy is masculine, the feminine is a masculine construction of women. Women are excluded from the signifying economy as this Otherness is defined by those who have the power to construct and enforce definitions of the Other (Butler, 1990: 7-19). Transgendered people are also unrepresentable within the existing signifying economy. The fact that there is no satisfactory alternative to male and female – and the pronouns⁹ associated with each of those categories – in itself creates a problem as it forces narratives, and in turn identities, to be expressed in words contingent on this dichotomy. In Chapter Five Norrie May Welby, for example, talks about the gendered nature of language and the difficulties of finding appropriate words that reflect identities that are in between.

Language is not neutral. It produces and reproduces social inclusions and exclusions. The stories or narratives that are crucial to narrativity also reflect these linguistic inclusions and exclusions. Leslie Bloom (1998) outlines the problems of narrative representation for women within the context of feminist arguments about the unrepresentability of women within language and in relation to the master-scripts or public narratives of female selfhood. The exclusion of women from the normative signifying economy, the seductive appeal of normalising cultural fictions about women, (femininity, heterosexuality, and motherhood for example), combined with the conventions of the narrative genre itself, which privilege coherent, linear and progressive stories, reproduce structures of domination that work to sustain sexual

difference - even when they focus on being about women and correcting invisibility. Drawing on Teresa de Lauretis (1987) and Sidonie Smith (1987), Bloom argues that 'when women create narratives, they often unconsciously reproduce patriarchal ideologies because these ideologies work like "master scripts" on the individual subject regardless of sex' (Bloom, 1998: 62). Ontological narratives directed at empowerment and control may draw on conceptual narratives that assume 'progress' or 'modernity', and the same time these agentic story-lines may be disruptive of those conceptual narratives.

Feminist theories about the possibilities and difficulties of representation for women within language may also be applied to people who identify as transsexual, or as intersexed, or as transgendered. Transgendered individuals are also excluded from the normative signifying economy. The transsexual person does not have access to the same normatively valued forms of symbolic representation that are traditionally available to (white, heterosexual, middle class, able bodied) men and women. The exclusion of transgendered people from forms of representation is evident in the way binary gender categories and heterosexuality dominate public space (Namaste, 1996a). The heterosexual domination of public space constructs homosexuality and transsexuality as invisible, unnatural, specific and out of place (Brickell, 2000: 165; Namaste, 1996a: 226-228). The social construction of the spatial in relation to binary gender categories is discussed further in Chapter Nine. The gradual erasure of intersexed bodies from forms of public representation has been achieved through the twin institutions of law and medicine (Hird and Germon, 2001: 163-164). In Australia, for example, the law requires that either a male or a female sex has to be entered on the Births Register. The state regulation of sexed bodies and identities is taken up in Chapter Eight. Medicine produces normatively sexed bodies and gendered subjects by the regulation, interpretation and management of intersexed infants. The physical appearance of these anomalous bodies is 'corrected' through the use of 'destructive' medical technologies including surgery and hormones (Chase, 1998; Hird and Germon, 2001). The discourses and practices of the medical professionals aim at producing a standardised body, one in which biological ambiguity is removed. The construction of sex, gender and sexual orientation in the medical management of

⁹ 'It' is an unsatisfactory alternative because it is non-sexed and non-gendered and has negative connotations - see Chapter Five in relation to this.

intersexed bodies is considered further in Chapter Four. These examples suggest that sexed bodies which trouble binary gender categories are considered Other in relation to normative sets of understandings about the relationship between gender and anatomy. Their subjectivity is marked and defined through a series of exclusions that are based on their difference from sets of medical and social understandings about the relationship between sex and gender. This Otherness has been traditionally defined by those who have the power to construct and enforce definitions of the Other.

The meanings that are associated with transsexualism are mediated through social and political institutions and practices which organise inclusions and institutional exclusions. The medical profession and the state are key actors in this regard. A limited range of powerful public and cultural narratives about the relationship between sexual difference, (hetero)sexuality and identity also inform the lives of most transgender people. Transgender subjectivities are unintelligible in relation to these narratives because they may be both male and female, heterosexual and homosexual. More recently some transgender people have begun to invent their own narratives and understandings about their identities which do not take as their basis powerful medical definitions of transsexualism and which refuse or challenge commonsense understandings about sexual difference (Stone, 1991; Bornstein, 1994, Feinberg, 1996, Nataf, 1996; Halberstam, 1998). These new narratives are part of a political project that involves creating inclusive private stories that are accessible in public contexts. They celebrate the possibilities afforded by multiple, shifting and fractured identities, they recognise the temporal and cultural specificity of identity categories and they criticise and contest theoretical dichotomies that support hierarchical forms of difference. Sandy Stone (1991), for example, comments on the disruptive potential of the 'transsexual text' within language. Stone's transsexual text potentially disrupts and multiplies the meanings and categories of gender and sexuality:

In the transsexual text we may find the potential to map the refigured body onto conventional gender discourse and thereby disrupt it, to take advantage of the dissonances created by such a juxtaposition to fragment and reconstitute the elements of gender in new and unexpected geometries... I suggest constituting transsexuals not as a class or problematic "third gender", but rather as a genre – a set of embodied texts whose potential for productive disruption of structured sexualities and spectra of desire has yet to be explored (Stone, 1991: 296).

In a similar vein, Nataf (1996: 58) anticipates a future in which gender diversity is accepted in the same way as cultural diversity. Nataf suggests that transsexuals are currently forced into binary gender categories because of threats of violence and loss of social legitimacy. He looks forward to a time when binary gender categories are replaced by multiple categories of sex and gender:

All this deconstruction and yearning for fluidity anticipate future evolutions of social genders and physical sexes, the actual outcome of which can only be speculated about. For now, these circulating representations of new genders to come urgently reveal the limitations of our existing categories, although our lives are already creating queer dissonances and unexpected geometrical combinations (Nataf, 1996: 56).

I also encountered narratives that were critical of binary gender categories among some of the people that I interviewed. In the following excerpt, Jack suggests that ideas about binary gender categories are still dominant. This dominance is beginning to be challenged by the recognition of different sexualities, and combinations between sexuality and social gender:

I think the problem is that society constructs the fact that there is only male and there is only female... I believe that the larger thing is that there are still only two genders, and I know I read somewhere that they talk about not a third gender but an acceptance of variables in between because there are variables. You have probably got your heterosexual male and then your gay male and then your hermaphrodite, your tranny girl, your tranny boy, your dyke and then your heterosexual woman and who is to say that there are not splits within each one of those again and again and again. Where does it end? We know where it starts, it starts with Adam and Eve Inc. ... Look the medical profession has towards society to say: "This one has a dick and it is a boy and this one has a cunt and it is a girl". And I'm sorry there is nothing else, it is a boy and it is a girl. Make up your mind. We can only have one or the other... let us reason that there are more than just the one, two or three. So bloody many variables that society is I think slowly learning to be more aware of the variables and to treat people in general with more respect but you will always have the winners and losers...

Jack, FTM, 1996

Jack places combinations between gender and sexuality on a continuum in which straight male and straight female are polar opposites; gay men, hermaphrodites, transgendered people and lesbians occupy the spaces in between. Jack suggests that there are probably more variables within the categories of sexual difference that are named in his continuum model. In this narrative a mythical 'Adam' and 'Eve'

represent irreducible differences between men and women (Stone, 1991: 294). The medical profession legitimates, and reinforces, normative physiological and social differences between the sexes.

Nick, a tranny boy whom I interviewed in Sydney, comments on the way the tranny community is singled out as different because people who identify as transgendered do not conform to normative understandings about the relationship between anatomical sex and social gender:

Our community is only different because society makes it different. We still bleed like you, our bones can still break like you, and I don't mean any disrespect when I say that, because we are no different, society makes us different because they accept that there is male and there is female and male should look like this and female should look like that. It is unfortunate that is the way that it is. The majority of flack comes from people who do not understand and are not prepared or are not game enough to ask the why. Some people might not ask because they are petrified, or they are unsure about their own sexuality. A lot of people confuse gender and sexuality and the two have nothing to do with each other. People have to relate gender to sex and in reality your gender is male, the female has a vagina, but that is only because society says so. And they have to either be one, or the other, why can't there be third sex, or whatever you want to call it?

Nick, FTM, 1996

Nick identifies similarities between transgender people and the non-transgendered world by appealing to a common humanity. He is critical of definitions of male and female that focus on the appearance of the genitals, suggesting that lines of connection between social gender and anatomy discriminate against transgendered people. I identify is Nick's narrative Bornstein's (1994) notion of 'third sex' which is used to question binary understandings of sex. At the same time, Nick recognises that 'third sex' may be problematic for some transgendered people.

Transgender activists, like Nick, are involved in the renarrativisation of sex and gender as a political strategy. They locate these terms in dominant cultural representations, institutional practices and relationships to others pointing out their heterosexist assumptions and institutional exclusions. Nick is critical of the way gender and sexuality are often conflated and identifies a fear of homosexuality as one reason why transgendered people encounter a lack of understanding among people that they meet. Nick also questions the oppositional categories of male and female by which he is classified as Other. At the same time in saying "your gender is male" Nick conflates

social gender with biological sex. Nick does not identify as butch/femme, nor would he identify with Halberstam's (1998) ideas about female masculinity, which retain female as the primary identity category. For Nick male equates to self, female represents the Other. He does not associate female with himself and he is careful not to conflate his genitals with who he is. Nick refers to the disruptive potential of third sex, but still positions himself as male within the male/female binary. Nick's talk illustrates the way that stories and bodies act as both resources and as constraints on identity.

Both Bloom (1998) and Somers (1994) talk about the unconscious reproduction of 'master scripts' by social actors. In my research narrative location was often very deliberate/strategic. People who transition across gender consciously locate themselves, both metaphorically and bodily, in public narratives of sex and gender. This is indicated in the following narrative:

I think as you go along you start to, I feel as though you start to have the gender stuff break down, but the fact is there can't be that much broken down if I know exactly where I should be. I must have a pretty rigid framework there to be able to hang the pieces on. So, I can't really say it is breaking down.

Craig, FTM, 1996

It is this conscious appropriation of public narratives associated with sexual difference, combined with critical attention to the way that biological sex and social gender are deployed as conceptual categories, that brings into focus the situated character of narratives and the narrative identities of transgendered people. The narrative identities of transgendered people are shaped by discourses that are dominant in the context(s) in which they are developed. The contextual nature of narratives suggests that the meanings of stories are not fixed. Stories have multiple interpretations, whereby particular meanings become salient in different relational settings. The next section looks at the politics associated with the spaces in which transgender stories are told and heard. Attention to the situatedness of narratives recognises the political dynamics of stories and spaces.

Situated narratives and the politics of spaces

Narratives are most unstable, that is most temporal and relational, at the level of ontology. Public narratives, or traditions, and 'denarrativised' meta-narratives are the most stable. According to Margaret Somers, the process of constructing and

communicating stories is the social glue that holds together multiple identities, events, times, spaces and relationships. She recognises the spatial character of narratives but this is not developed in her analysis of the practice of narrativity (Somers, 1994: 164). Somers attaches history and relationality to social identity, social action, social agency, experience, events and relationships, but not to narratives and spaces *per se*. In Chapter Nine I argue that space¹⁰ is relational in the sense that it is constituted by and constitutive of social processes (Massey, 1992: 80-81; 1994: 2). The social dynamics of space are indicated by its gendered and sexualised dimensions.¹¹ The following section of this chapter explores the way that subject positions are made available to actors in social interaction through shifting associations between spaces, discourses and corporeality.

Attention to narrative identity involves locating social action in the network of relationships in which actors are embedded, and in the numerous cross-cutting story-lines with which people identify (Somers and Gibson, 1994: 67). Social relationships and cultural practices are embedded in the stories through which people constitute their identities. Somers' focus on reinterpreting historical data means that consideration of the dynamic aspects of inter-personal social encounters is not the focus of her analysis. How people orientate themselves in relation to their experience of interactions, practices and the public narratives embedded in conversational story-lines is, however, outlined in the work of Bronwyn Davies and Rom Harre. Davies and Harre (1990, 1999) explore how selves are discursively produced in social interaction. According to Davies and Harre, selves are located in conversations; telling a story positions self and other in relation to the story-lines told. They refer to this process of relational story-telling as 'positioning' (Davies and Harre, 1990: 52; Davies, 1992: 54-55). Positioning is embedded in the dynamic aspects of social encounters. In conversational speech participants draw on personal and cultural resources in order to actively construct the present moment. The social meaning of a conversation is dependent upon the way actors are positioned in and through the speech acts of participants and the place in which it occurs. In conversational speech actors are located (or may locate themselves) in subject positions which are in turn embedded in historically and culturally specific shared understandings about the rights, obligations, expectations and social structures associated with that position. Thus actors'

¹⁰ I understand, and use 'space' as geographical (McDowell, 1996: 32), political (Massey, 1992: 66), physical (Wendell, 1992: 69; Chouinard and Grant, 1996: 176), embodied (Grosz, 1994: 79-80), relational (Massey, 1992: 80-81; McDowell, 1996: 29) and social (Plummer, 1995).

¹¹ Space and place are also discussed in Chapter Nine.

understanding and experience of their social identity, the social world and their place in it is discursively constructed' (Frazer (1990) cited in Davies and Harre, 1990: 45).

People who are in the process of transitioning across opposed gender categories are acutely aware of their own gendered subject position and the way that they are positioned as male or female in conversations with others. Davies and Harre's arguments about positioning are best demonstrated in the following narrative about getting a haircut from a person who had only recently transitioned:

I used to think that there was a certain haircut that you could get, I went to the hairdresser, this guy down the road, I was going to him for ages and I said to him: "If you were cutting a guy's hair would you be cutting it like you are now?" And I thought he would say "no", and he goes: "Oh yeah, I'd be cutting it differently". It just floored me, it was just devastating, he was just basically doing a number 1 all over, or a number 2, and fixing it up around the edges, and I thought that was a guy's haircut, and that is what he was doing. And I said: "Well if you were cutting a guy's hair now how would you change?" And he goes: "Oh, I would be cutting it a lot sharper around here", like he was doing stuff to my head, showing me. "I would make this a bit sharper and I'd have all the lines a bit sharper". He said: "For a female I'm doing it a lot softer and a lot more easier". I didn't go back to him ever again... So of course, then I went down Devon Street, and there is a seven buck shop, or something, and I picked out a girl there who I thought, and I was right, she's a lesbian, she's got everything pierced, she has got her head shaved, little tufts of coloured pink hair sticking up. I got her, explained the situation to her, exactly everything, well not everything, very briefly, and she has cut my hair ever since perfectly.

And I went into a shop yesterday, because I get my eyelashes done every now and then, and I just wanted to get a time with someone. I know the other girl there thinks I'm a guy, but this girl, I'd never seen before, she must have thought I was a girl and she goes: "I really like your hair, God I couldn't go that short you know". And I'm completely thrown. I'm just sitting there thinking I'm not following you at all. And then I realised she thought I was a girl, she was assessing my haircut in terms of what she could do, and how brave I was as a girl, in the girl's club you know. But it only made sense to me later, all of the things she was saying, if you were one of the club and you were challenging the club's rules or something. That's happening a lot, I guess because maybe I'm sort of still on the boundary there, or something, or I look on the boundary...

Craig, FTM, 1996

Craig provides an amusing anecdote about the seemingly mundane practice of 'getting a haircut' which illustrates Bronwyn Davies and Rom Harre's (1990, 1999) arguments about positioning. In the first part of the narrative Craig is positioned as a female by the hairdresser who gives him a feminine version of a number one hair cut. Craig is so surprised by this that he asks the hairdresser to demonstrate the difference

between a male and a female haircut. Craig's objection to the hairdresser's positioning of him as female motivates him to seek another hairdresser. In conversation with me Craig indicates his opposition to being positioned as a woman by the hairdresser. In the actual salon Craig suffers this positioning in silence, he does not correct the assumptions of the hairdresser regarding his gender identity, and he remains in the chair until his haircut is completed. Craig's thwarted subjectivity exemplifies the way gender identities are constituted and reconstituted in conversations and through the social interactions in which people participate. Craig learns that, although they appear to be short all over, number one haircuts are gendered. Male haircuts are 'sharp', female haircuts are 'soft'. He considers that his 'soft', 'female' haircut is incompatible with his view of himself as a man. In other words, in the area of appearance an aspect of self and other is learnt in this interaction.

Craig justifies his positioning of the second hairdresser as a lesbian by referring to the culturally established meanings associated with the cluster of attributes, body piercing, a shaved head, and tufts of pink hair, displayed by the hairstylist. Craig identifies these attributes as markers of lesbian 'unfashion' (Hebdige, 1979: 107). Craig's anecdote draws on cultural stereotypes about lesbians which provide non-verbal clues as to the hairdresser's sexual orientation. This illustrates the way that people are sometimes passively positioned by others in public space. Craig chooses someone he defines as a lesbian as his new hairdresser because he assumes that she will be sympathetic to his situation. In order to ensure that this hairdresser 'reads' Craig as a man, and provides him with the desired male haircut, he provides her with a story about his gender identity.

Craig then goes on to describe another incident in a beauty salon in which he was unwillingly positioned by the receptionist as a woman. As is the case with most interactions, the receptionist's positioning of Craig as a woman was unintentional or taken for granted. Craig, who admits that his gender identity is currently ambiguous, was displeased at being positioned as a woman in this 'feminine' space. Craig interprets the receptionist's reaction to his haircut as violating the unspoken rules of the 'girls club'. In the context of Craig's ambiguous body the male haircut should work to provide strangers with non-verbal clues as to his male gender identity. In this interaction the short masculine haircut does not signify a male identity, but is instead read by the receptionist as challenging public scripts of femininity. Craig's narrative

about being positioned as a 'girl' in the beauty salon is also shaped by the particular characteristics of the context in which he presents himself. A beauty salon is typically used by women, Craig wants his eyelashes dyed - a service that is more commonly requested by women. The salon and the procedure influence his interaction with the receptionist and therefore the likelihood that she would position him as a staunch female rather than as a male. This section of Craig's anecdote illustrates the significance of context to the way that we present ourselves; it is not just discourses but also spaces that make available certain subject positions to actors.

Harrison White (1992) argues that identities become salient when individuals encounter inconsistencies between their narrative constructions of (male) self and the social contexts (such as the salon) in which they interact. The different ways that Craig positions himself and is positioned by others in this narrative illustrates the complex ways that identities are negotiated in everyday social encounters. His narrative also indicates that 'positioning' is not just a conversational phenomenon; subject positions are also tied to spaces and to a person's corporeality. Craig wants to position himself as male physically rather than through just words or conversation. He pursues an embodied maleness and his story is about how he acquired the right number one male haircut only to find himself identified as a staunch 'girl' in a particular context. People who transition across binary gender categories may be viewed as bricoleurs¹² (Levi-Strauss, 1966; Hebdige, 1979: 103-106) who improvise in constructing their narrative identities out of public discourses of sex and gender. This bricolage is often made possible by the spaces in which transgender people are located.

The place of stories, contexts and bodies in constructing a gendered self is demonstrated through Craig's narrative. Craig's anecdote also illustrates the way self and other are enacted in everyday conversations. The words of the receptionist, and the actions of the first hairdresser, contain images and metaphors that assume and invoke problematic ways of being for Craig. Craig is aware of the way that he is positioned by the first hairdresser and the receptionist. Shared understandings about Craig's male gender identity are absent from both of these interactions. Davies and Harre (1990,

¹² Drawing on Roland Barthes' (1956; 1993: 100) arguments about signifier, signified and sign, Hebdige (1979: 106) describes bricolage as the 'juxtaposition of two apparently incompatible realities in order to disrupt and reorganise meaning'. Transgender activists who appropriate objects typically associated with one gender and reassemble them in order to disrupt or challenge categories of sexual difference are bricoleurs. The process of changing or subverting the role of an object in order to convey a different meaning is bricolage. See Chapter Five for a more comprehensive discussion of bricolage.

1999) and Davies, (1993: xv) observe that the positions created for oneself in autobiography are not necessarily non-contradictory or linear. Craig's narrative concludes with a reflection on the difficulties associated with keeping a particular narrative of identity going when his current ambiguously gendered appearance means that he may be positioned as either male or female in social interactions. Implicit in this narrative is Craig's previous identity as female and his current identity as male. Craig is able to do both - the challenge is how successfully he manages to present himself as male and to efface his femaleness. The relative success or failure of these attempts depends on the context of the interaction.

Craig presents to me as a male who has transitioned from being a 'girl', and he also hints that he told the second hairdresser about his FTM transgender status. Craig's positioning of self and other in conversation is dependent on his learning oppositional categories, specifically in this case male/female, masculine/feminine, soft/sharp, straight/gay. Craig participates in interactions where the meanings associated with these categories become salient. He recognises which categories he belongs to and positions himself as male in relation to the meanings associated with those categories. Craig's narrative illustrates the way subject positions offered by participants in conversation may confirm identities or block access to desired identities. As a result, contradictions between the self identity of transgender people and the way they are positioned by others in social interactions provides an important site for exploring what it means to be a gendered person.¹³

Craig's narrative about the incident in the hair salon indicates that it is not just narratives but also spaces that make certain subject positions available to actors. Subject positions offered in conversations are not just discursive, or performative, but are tied to a person's corporeality. Stories do not simply reflect social life. Rather the contexts in which lived narratives are assembled play an active role in the story-telling process. Craig's narrative about being positioned as female in the beauty salon, and my field notes about his problems at work, indicate that stories and identities are constrained by the internal dynamics of the spaces in which they are told and heard. Interviews open up spaces for telling stories that would not easily be heard in other

¹³ Craig responded to my analysis of his words in this section by suggesting that as he has always identified as a man his attempts at escaping the 'girls club' were thwarted - rather than his male identity - in his interaction with the receptionist in the beauty salon.

contexts. Stories about transitioning across gender are an example of this kind of marginal story.

Shared understandings about legitimate and illegitimate narratives reflect patterns of domination which facilitate or frustrate the capacity to tell a story. These patterns are not fixed but change over time and in relation to the author and the audience (Plummer, 1995). Certain spaces close down the possibility for particular stories to be heard; others open them up. There are very few spaces/places in which stories about transitioning across gender may be reasonably freely articulated. One of my research sites, the Gender Centre a centre for transgender activism, is a space in which these narratives circulate. In this place/space state funded support services are targeted at transgender people, energetic local political activism occurs, debates focusing on transgender issues appear in local queer newspapers. In this locale a significant number of people who identify as transgendered have ready access to a range of narratives about transitioning across gender. Ken Plummer (1995: 22) argues that the telling of a story is bound up with the life worlds of the speaker and the wider imagined 'communities of interpretation' through which stories circulate. In Sydney local knowledges about transgender politics and public narratives about sex and gender provide the personal and cultural resources for speakers to draw on in constructing their lived narratives. In the following extract, Michelle, a male-to-female transsexual interviewed for this project, talks about the way her narrative about self changes from one moment to another:

If I could reach that sense of belief and acknowledgement in the world (as a woman) then *that would be my preferred space*, but because I don't feel comfortable about that then I adopt a transgender identity with pride if you like. I think it would be nice to (pass)... it is such a philosophical question because in not identifying as transsexual we are then supporting the binary gender system which we generally tend to find offensive anyway. And I change on this one, I have to confess that my attitude at one moment may not be the same as another. My attitude at present is probably that having spent most of my life living one lie, I think that I would be then living another lie if I just then tried to say I was female and always was female. *Transgender is my true space*, but I guess it would be more comfortable as one or the other, safety in numbers you know you just melt in. Transgender, you really are standing out, you are sticking out, you are a good target. But philosophically, I guess that I would like to see gender as we know it evaporating.

Michelle, MTF, 1996

Michelle's narrative about self shifts and changes in relation to the political ideas about identity and gender that she encounters in her local transgender community. She understands the politics of claiming and positively affirming an identity category that has previously been negatively valued. At the same time 'passing' or being identified as an ordinary female is attractive because it is 'safe'. Michelle says she agrees with philosophical debates advocating the abolition of binary gender categories but her enthusiasm for these ideas is tempered by her experiences of discrimination. Transgender as a 'preferred space' in Michelle's narrative is really transgender as an identity category. Michelle's preferred space is, however an uncomfortable place to be, one that makes her a potential 'target' for vilification.

Transgender identities are not only limited to local contexts but are also constituted in relation to national and international processes. In this view, local, national and international contexts introduce difference into the category 'transgender'. Wendy, an MTF, comments on the difficulties of applying Kate Bornstein's (1994) arguments about gender fluidity to the Australian context:

Nobody knows the truth about gender, that is an open question. People have to explore that, and find that out for themselves. It would be good if we could just abandon all constructs of gender altogether - Kate Bornstein's argument. But you have to remember that Bornstein's argument comes out of the North American experience. Over in America there is a huge transsexual/transgender culture there, out in the open, in all the big cities in America. The culture is huge with businesses run by transgenders for transgenders (and others). Bornstein's ideas represent just one extreme end of the spectrum, one voice, in a very vibrant and diverse tranny culture. In Australia there is no large transgender culture, her ideas are not (yet) appropriate here...

Wendy, MTF, 1996

Wendy argues that the sheer size of transgender communities in the large North American cities means that narratives developed in those communities are not particularly helpful to transgendered people living in other places. In Wendy's narrative different relational settings are important to the forms of political activism available to people and therefore the stories that are able to be told about being transgendered. Ken Plummer (1995) argues that the power to give voice to a narrative, or to remain silent, is part of the political process through which narratives are regulated. Wendy implies that it is easier to claim a non-gendered identity and to have a 'voice' in a 'vibrant and diverse tranny culture'. Both Michelle and Wendy indicate that crafting transgendered identities in their own local settings is much more difficult.

Towards a corporeal narrativity

In summary, how individuals take up and are taken up by particular narratives and resist others is under-theorised in Somers' (1992, 1994) arguments about narrativity, agency and subjectivity. Transgender identities and ontological narratives are managed in the context of occupying bodies that confound public narratives associated with sexual difference. The inter-personal, social, relational and spatial dimensions of ontological narratives may be accessed through attention to the contexts in which narratives are in play. The telling of a story is bound up with the life world of the speaker and the wider communities of interpretation through which stories circulate. The meanings of stories are not fixed; stories have multiple interpretations, whereby particular meanings become salient in different relational settings.

Somers' (1992, 1994) concept of narrativity and Plummer's (1995) arguments about the internal dynamics of spaces embed identity, experience, social action and social agency in numerous cross-cutting relational storylines which are particular to a specific time and place. Somers pays attention to differences in narratives across geographic space, while Plummer's work explores the social spaces in which stories are expressed and received. The internal dynamics of spaces need to be developed through attention to physical spaces – the workplace, the cafeteria, the restaurant, the hairdressers, the beauty salon – the social locations that facilitate or inhibit stories, embodiment and the practice of narrativity. People construct identities, however multiple and changing, by locating themselves or by being located in stories or public narratives that shift over time and space. Stories are similar to identities in that both are dynamically and progressively achieved. We have selves because we have storylines – our capacity to be a self, to be an agent depends on our capacity to craft stories about ourselves. Selves are located in conversations; as a result subjectivity is generated through discursive practices. Narrative identities shift according to the subject positions made available in stories and in one's own and others' discursive practices. The narratives that social actors use to craft identities are also shaped by their location at any particular point in time in certain social relations. Understanding narrative identities as embedded in the politics of spaces, cultural representations, public narratives and relationships to others foregrounds the active, fluid, contingent and social nature of stories and subjectivities.

In this chapter I have argued that attention to the dynamic aspects of inter-personal encounters facilitates an exploration of the unstable, relational, temporal and spatial dimensions of narratives and narrative identities. My sociological research was negotiated within this dynamic interplay between temporally and spatially contingent stories and identities.

In the next chapter I explore the way in which research stories are co-produced through interaction between the researcher and the people who participated in this study. This combines key methodological concerns with details about the actual process of doing research. I consider methodological debates that privilege women and/or gender as the subject of feminist research and reflect on these debates in relation to my position as a woman interviewing people who have been both (sometimes simultaneously) male and female.

Generating collaborative stories

...stories are not simply 'languages' or 'texts' or even 'discourses'. I want to move right away from the current, almost obsessive, concern of much analysis which reduces dense, empirical *human* life to *texts*. Social reality may be approached metaphorically as a text, but it is not in actuality a text... *the sexual stories I will be discussing must be seen to be socially produced in social contexts by embodied concrete people experiencing the thoughts and feelings of everyday life...*

Ken Plummer (1995: 165 *italics in the original*)

Nick, a self-identified FTM, is a cocky young man the same age as me. He is full of bravado and confidence; he does a particularly macho working class version of what Bob Connell (1995) would refer to as 'hegemonic masculinity'. Armed with coffee we settle into the comfortable sofa in his sunny living room for the two-hour interview. Nick proceeds to tell me calmly the sad and harrowing tale of his life - of orphanages, of being gang raped at eighteen to 'make him straight' and of transitioning across binary gender categories. It is a story of survival from a man who refuses to be a victim. It is also a practiced story, one that he has told many times before both publicly and privately. Some months later, I tune in to late night TV in order to see Nick telling an abridged version of this story to a national audience (Field notes, December, 1996).

* * * * *

It has been a long day. I've been attending a conference on transgender issues and I have been listening to people who have diverging opinions on transgenderism attempting to find some common ground across entrenched ideological, class, ethnic and surgical barriers. The conference is an example of the very real practical difficulties associated with a politics of difference within marginal communities. I meet Jude at the conference and she insists on being interviewed that very evening. I have my tape recorder, interview schedule, spare tapes and batteries so I agree to go home with her. It's Australia Day; a fact that has escaped my attention until the interview is punctuated with the sound of fireworks exploding on Sydney Harbour. Jude, an avid reader, quotes back to me Judith Butler's ideas about gender as performance and post-structuralist theories about identities as multiple, shifting and contingent. She wants to know about Foucauldian theory, aspects of which were being used by some transgender activists at the conference, and we talk at length. Jude provides her own analysis of the politics of the day, one that pays attention to contradiction and difference (Field notes, January, 1997).

* * * * *

Wendy sits in my room at the university, she is very hostile, she wants to know what my research is going to achieve for transgendered people. Wendy has a master's degree and she understands how research findings sometimes get appropriated for an investigator's own ends with little benefit to the people who have contributed to the study. She wants to make sure that I am not one of those researchers. Wendy is a prominent person in the community that I wish to study. It is a tense moment, one that could make or break my presence in that community. I'm not prepared for her questions, and I already feel that my position as researcher in the community is marginal and tenuous. I don't answer her questions directly, because, even to my own ears, such answers would sound rehearsed and therefore insincere. Instead we talk at length about how I came to be interested in the topic, what I thought about different theoretical positions on transsexualism/transgenderism, how I am going to use the interview data. Wendy's hostility subsides as she listens to my responses to her questions. Wendy admits that my interview schedule covers some interesting issues. But her questions are disquieting. She is right; I cannot see how my research is going to help transsexual/transgendered people in any immediate, practical way. This is the first of many subsequent conversations in which Wendy tests my skills as a researcher and extends me intellectually (Field notes, October, 1996).

These three vignettes from my field notes illustrate some of the issues that I wish to discuss in this chapter. They concern the contexts in which research narratives are co-produced, reproduced and consumed. Sociological research is not simply an often frustrating and ultimately solitary process through which texts about the social are produced. To paraphrase Plummer (1995: 165) research is conducted in particular social contexts 'by embodied concrete people experiencing the thoughts and feelings of everyday life'. It is the contexts, the people and their emotional investments in the narratives co-produced during my field research that are the focus of discussion in this chapter. Through this discussion, I want to highlight the interpersonal dimensions of narrativity, the interaction between individuals, stories, the interview context and the particularistic, socially situated narratives that I encountered while doing my research.

This chapter combines key methodological concerns with details about the actual process of doing research. In the previous chapter, I argued that stories and identities both emerge from interactions, shifting and changing according to the spaces and times in which they are embedded. My sociological research is negotiated within this dynamic interplay between temporally and spatially contingent stories and identities. Somers (1993, 1999) provides historical analyses that reproduce and reinterpret existing narratives. I generate my own with people who participated in this research. My interaction with Wendy reflects this difference between Somers' historical actors, who contribute to, but are not actually involved in the research process, and my encounters with critical narratives in face-to-face situations. I explore the way

research stories are co-produced through interaction between the researcher and the people who participated in this study. I consider methodological debates that privilege women and/or gender as the subject of feminist research. My position as a woman interviewing people who have experiences of being both male and female is also an opportunity to address debates about the positioning of researchers and the politics of knowledge production.

Getting into place, generating stories

Constructing a methodology chapter is rather like imposing order and coherence on a process characterised by chance and contingency. Fieldwork, according to Goffman, (1989 [1974]: 125) is a way of generating data through subjecting your self, body and personality to the set of contingent circumstances in a particular research setting. Research for Goffman (1989 [1974]: 126-127) is a matter of 'getting into place', and 'making a world' by providing a plausible story for your presence. It involves opening yourself up to new experiences and people in ways that may make you vulnerable, but it also involves exploiting any opportunities that may arise (Goffman, 1989 [1974]: 128). Although Goffman's advice refers to the sort of fieldwork that involves extended covert participant observation, I recognise in his suggestions and anecdotes aspects of my own research experience doing qualitative interviewing at a particular locale. Most of my research was carried out in a different country in cities with which I was only marginally familiar. I had the amazing good fortune to secure accommodation at Sydney University on the inner city border of the bustling suburb of Newtown. In the summer of 96/97 the clubs and cafés of Newtown, as it turned out, were the local hangout for many of the politically active transgendered people that I met during the time that I spent in Sydney.

The point of fieldwork for Goffman (1989 [1974]: 128) is to experience the field 'as a witness', 'not as an interviewer'. This involves attending to how the people that you observe react to what is going on around them. Interviewing, as Goffman implies, is often characterised as the sort of research that involves getting in, getting information and getting out with minimal involvement in the day-to-day complexities of people for whom your research topic is the stuff of everyday life. While I used interviewing as a research strategy, I lived in my research site and I could not help but experience my research in Sydney both as a witness and as an interviewer. People came to my home,

‘they told me secrets, they invited me out, and they demanded that I share more of myself than is normally expected in the interview context.

I did not achieve the ‘deep familiarity’ (Goffman, 1989 [1974]: 130) with my research site that is the desirable goal of fieldwork. This is because I was not doing fieldwork, but I was familiar enough with the context to be able to triangulate what people were saying with actual events. Three events dominated the narratives of all of the people that I interviewed: the passing of the Transgender (Anti-Discrimination and Other Acts Amendment Bill) 1996 in the New South Wales Parliament, the ongoing political divisions within the community and the February Gay and Lesbian Mardi Gras. The legislation came into effect on October 1, 1996, only a matter of weeks before I arrived in Sydney in late October. An extended discussion of this legislation, and the way that it informed the narratives of the people that I interviewed, is explored in Chapter Eight. Chapter Nine considers how communities are ‘imagined’ through collective rituals such as the 1997 Sydney Gay and Lesbian Mardi Gras. Political divisions are also explored through an analysis of the way that the boundaries of communities are constructed and problematised through internal debates about who should represent and provide services for the Sydney transgender community.

One of the issues I wanted to address in the thesis was the way in which research informants might be viewed as theorists and experts in their own lives and realms of experience (Lemert, 1997: xi). Several of the people whom I interviewed presented gender as work.¹ In doing so they gave a sense of the ‘expert knowledge’ that is involved in doing gender (Smith, 1990: 203).² Charles Lemert (1997: 5) refers to this tacit knowledge as ‘sociological competence’. Being transgendered involves keen attention to social processes and high levels of reflexivity. MTFs and FTMs have expertise at being men and women. This allows them to reflect on the tacit knowledges surrounding doing gender that most of us take for granted. Knowledge about doing gender requires more than a sociological imagination (Mills, 1959). It requires practice and practical knowledge. The talk of those who are transgendered is one way of accessing gendered expertise. The task of the sociologist is to provide access to this practical knowledge through the explication of individual experience set in the context

¹ For specific examples of respondents who represented gender as work see Craig’s narrative about getting a haircut in Chapter Two and Robyn’s Story in Chapter Three.

of the discourses and practices that make this experience possible (Bourdieu, 1988: 782; Bourdieu and Wacquant, 1992: 205-206).

Sociological research is not neutral; it is shaped both theoretically and empirically. It does not provide a complete picture of a social world that is only partially comprehended by the individual (Bourdieu, 1988: 780). As a result, tensions between researcher and researched are an ever-present problematic in sociology (Du Bois, 1983; Fonow and Cook, 1991; Bloom, 1998). The sociological gaze, our ways of collecting and interpreting information and our connection to academia, implicitly construct a hierarchical opposition between the researcher as knower and informants as those who are known about (Bourdieu, 1988: 780). Instead of accepting this distinction, I wanted to acknowledge the way research stories are co-produced through interaction between the researcher and the people who participated in this study.

Davies and Harre (1990, 1999) explore the way subjectivities are generated through discursive practices which 'position' people in social encounters. According to Davies and Harre selves are located in conversations; telling a story positions self and other in relation to the story-lines told. There is only a limited repertoire of available representations and stories; people tailor personal narratives to fit these stories, and shared public narratives are in turn consolidated by the stories that people use to constitute their identities. Similarly, Ken Plummer (1995) considers the interactions that emerge around story-telling. Plummer (1995: 21) suggests that as a researcher I am a 'coaxer', and therefore a producer, of stories. My research questions, for example, contained texts that offered a range of subject positions to informants and asked them to comment on alternative ways of articulating themselves. Our face-to-face interactions were vital to their interpretation of whether they were to accommodate themselves to these given questions or contest them. Thus, stories about transitioning across gender were co-produced in the interview context. Transgendered people, for example, often talked about how different spaces enabled or required different enactments of self and therefore different ways of locating themselves *in* their

² Smith argues that the fashion industry does not simply determine women's appearance in local settings. Femininity and fashion are instead a resource where women are competent 'active, skilled, make choices, consider are not fooled or foolish' (Smith, 1990: 203).

stories.³ It was important at times that I was familiar with some of those places and spaces. Personal stories generated in social research situations enable people to reflect upon themselves, their relationships with others and with the social worlds in which they interact. In this way stories generated through research may be seen as joint actions between participants in (staged) conversations (Plummer, 1995: 20).

Interviewing involved both the respondents and me positioning ourselves in particular story-actions. I positioned myself in the interview context as a 'non transgendered' female researcher interested in 'gender issues'. During their interactions with me as researcher, the people often presented themselves as strategic actors who crafted the 'right' gender identity, but also as people who might still be framed in terms of their previous gender identity. Respondents also positioned me as an academic researcher and student, but also as an outsider - twice removed. This was made explicit in one of my conversations with Craig where I voiced my concerns about being a non-transgendered 'outsider' and how this would impact on the sorts of stories that I would be able to access. Craig's quick reply was that as I was not an Australian I was always going to be an 'outsider' anyway.⁴

It is perhaps fortunate that in most research settings there are always one or two 'locals' who are prepared to contribute to your research in ways that extend beyond a one-off interview. I made friends with a small number of people who acted as 'informants' while I was in Sydney. These people talked to me frankly about their experiences of transitioning across binary gender categories, relayed to me interesting gossip and filled in the history of the community from their 'point of view'. I was able to ask them about observations or comments made by other (anonymous) research participants that I found 'unusual' or 'challenging'. These people also made material contributions to my research. One of them let me have access to her extensive archives of material about the Sydney Gay, Lesbian and Transgender Community. I was provided with on-going written observations about the divisions in the community by one person, while another gave me copies of state funded research reports on the Sydney transgender community. These people and the networks I developed within the community ensured that the interviews were not the only strategy for learning about

³ See, for example, Craig's email at the end of this chapter and my discussion of Robyn's story in the following chapter.

⁴ This comment reflects Craig's own position – Craig holds dual citizenship and at the time I recorded this conversation saw himself as in some ways a 'non-Australian' 'outsider' (Field notes, January, 1997).

doing gender and living transgendered lives. While I was in Sydney I also started up a weekly reading group with two other post-graduate students who, like me, were doing research around transgender issues. The reading group provided an informal forum in which I could discuss concerns about my research process. I was also able to draw on the local knowledge and historical memory of the other participants in the reading group in order to cross-check comments made by informants and research participants. The embodied, concrete and social dimensions of research are indicated in the following extracts from my field notes which were written in response to an interaction in this reading group:

We were sitting on my balcony in the sun drinking coffee and talking about the latest readings (Haraway's (1991) 'Gender for a Marxist Dictionary', and Fausto-Sterling's (1993) 'The Five Sexes') when someone said to me totally out of the blue:

"When did the shark get you?"

I said confused and not understanding the reference: "Pardon?"

He said: "Your arm, did you get bitten by a shark?"

I said, suddenly understanding, "Oh no, I've had a kidney transplant and that is where I used to put the needles in for kidney dialysis."

I did not really want to answer the question but felt obliged to do so. Attention to the reading stopped at that point and I had to explain my illness at great length, which meant recounting a great deal of my personal biography as well. This is not the first time this sort of thing has happened to me, and when this does happen I always wonder how long that person has wanted to say something to me, and how many other people notice my arm and do not comment on it. Usually I find that the people who do ask have had illnesses themselves, or are involved in the medical profession, and therefore tend to be less awkward about asking. It transpired that the person who broached the subject of my problematic arm in the reading group had survived cancer. I feel absolutely ambivalent about talking about my own experience of illness; it is a narrative that I usually like to keep private. In reflecting on the reasons as to my ambivalence to my 'illness narrative' I think it has a lot to do with the way in which illness and disability are 'othered' in contemporary Western societies and that the experiences of people with disabilities are silenced (Field notes, January, 1997).

My experience of illness and ambivalence to it enables me to understand the way that transgender stories are also silenced and transgendered people 'Othered'. My life-long experience of disabling illness has also taught me that we ignore our bodies at our peril. My own body, its capabilities and incapacities, what may be read from samples of blood and tissues, has had a significant impact on my sense of self and the choices I

have been able to make. This 'embodied' experience has underpinned a healthy skepticism of the linguistic or discursive turn in the humanities and social sciences (Frank, 1996: 55; Davis, 1997: 11).⁵ It is perhaps ironic that, while the body has become an acceptable topic for sociological analysis (Shilling, 1993; Scott and Morgan, 1993; Connell, 1995; Davis, 1997) the focus until recently has been on discursive practices rather than the lived reality of the body (Connell, 1995; Frank, 1995, 1996).

Arthur Frank's (1995, 1996) attention to the embodied experience of cancer and Wendy Seymour's (1998) focus on post-trauma rehabilitation both utilise and cut against the grain of the discursive turn in social theory. Prior to 1995 such first-hand, theoretically engaged accounts of the way that bodies may be experienced as 'other' were rare (see Wendell's 1992 [1989] post-structuralist account of disability). The corporeal turn in the social sciences represents a welcome turn towards incorporating the experiences of people with disabilities into mainstream feminist social theory. Sadly, Witz (2000: 3) uncritically suggests that the feminist distinction between sex as a biological and gender as a social category retrieved women from the realm of the corporeal or natural and instated them within the realm of the 'social'. This turn to gender has coincided with a turn away from corporeality and embodiment while attending to body politics. Witz (2000: 6) states, for example, that feminist work has rarely problematised embodiment or taken it as a starting point.

Witz observes that the new sociology of the body (Turner, 1984; Shilling, 1993; Frank, 1995, 1996) pays attention to 'his abject male body' and not her 'excluded female body'. Women are incorporated into the new sociology of the body through analyses of desire and patriarchy, which tend to re-associate women with the body, sexuality and reproduction and to leave under-theorised the wider issues of gender and power. Witz (2000: 8) is also uncomfortable with the way that the sex/gender distinction is absorbed into the Foucauldian sex/sexuality distinction in feminist post-structuralist theories of the body (see Butler, 1990, 1993; Grosz, 1995). She argues that these theories have de-naturalised sex at the expense of critical engagement with gendered sociality. For Witz (2000: 9) gender is a complete set of social relations that cannot be reduced to sex or sexualities.

⁵ The theories of Michel Foucault (1978) and Judith Butler (1990, 1993) are most commonly associated with the discursive turn in the humanities and social sciences (see Davis, 1997: 11-15; Williams and Bendelow, 1998, 35 and 127).

The turn away from the body in feminist theory has meant that women with disabilities, and women who have had experiences of chronic illness, may find the focus on abjection in the 'new' sociology of the body (Shilling, 1993; Frank, 1995; 1996) more useful than feminist theories that focus on issues of gender and power at the expense of embodiment *per se*. Certainly Witz's arguments, while challenging, continue this feminist tradition of excluding the abject female body from the feminist conversation. I could not have the above discussion about my problematic arm and tell the story about my history of illness without having had this deeply embodied experience. At the same time feminist theories about medicine as a patriarchal profession (Davis, 1988; Martin, 1987; Sawicki, 1991) framed, and helped me to make sense of, my experiences in the medical setting. My personal experience of these tensions between the biological and the social, an idea that this opposition reflected the sex/gender distinction within feminist theory, and a willingness to work through these issues, informed the set of theoretical concerns that I wanted to bring to the thesis. My thesis has therefore been a personal project about how feminist sociology may pay attention to bodies while also focusing on the sociality of gender.

Posing questions, doing research

The ethics committee application protocol prepared by the Human Ethics Committee at the University of Canterbury required that an interview schedule be submitted along with the application. This requirement meant that I had to develop my questions before I left for Australia and started to interact with those who participated in this project. The ethics committee application directed me to doing interviews, rather than embracing the uncertainty and flexibility of fieldwork, and my interview schedule excluded the sort of research that involved exploring a range of topics rather than answering specific questions. I did not at the time consider supplementing my interview schedule with other research methods such as life history or participant observation. I had the opportunity to do both during my field research in Australia. I took up the former option and decided against systematic participant observation at a gender reassignment clinic. Perhaps if I had trained as an anthropologist rather than as a sociologist, I might have considered a less structured and more explorative research strategy.⁶ My initial view of my project, which limited my research strategy

⁶ Amit (2000: 1) suggests that the distinction between sociology and anthropology is often unclear. She points to ethnographic research as the defining feature of anthropology. Anthropological research involves extended 'experience in the field' usually in a foreign setting. Ethnographic research in this view is a total experience; it is embodied and performed, the implication being that sociological versions

to one semi-structured interview schedule, turned out to be unrealistic and restrictive once I entered the research setting. Learning in the research setting could not be limited to my interview schedule; it involved interaction with key informants, participation in local networks and attention to the broader contexts that framed the narratives of people that I encountered.

The incongruity of constructing research questions in Christchurch, New Zealand for research sites in Australia became obvious within the first two or three interviews in Sydney. I had placed issues of community at the beginning of the interview schedule because I thought that this would be a comparatively neutral subject and it would ease respondents into the interview, allow me to build rapport and establish trust. I did not expect that the comparatively neutral issue of community would be so problematic for so many people - a cautionary tale perhaps about developing an interview schedule so far away from the research field. I was the unsuspecting sociologist who entered the field precisely at the time when issues of community were most problematic. Community was subject to contestation through different forms of political activism and through the emergence of a new form of transgender identity politics from North America. When I asked people about issues of community most people backed off from making definitive statements about community. Some people even asked me to turn off the tape recorder while they answered these questions. Long silences indicated that people were obviously and carefully choosing their words and some qualified their responses with statements like "don't quote me on this but..." or "it is my understanding that... but other people may view that differently". Initially I did not understand what was going on. I was puzzled about these long silences, uncomfortable body language, and just general reluctance to talk about the major issues within the transgender community. It was only when one of my informants carefully explained the context to me that I understood the difficulties I was experiencing with this section of the interview schedule.

of ethnography are a poor imitation involving bounded research, at home (Amit, 2000: 1). This distinction is now somewhat problematic given that some anthropologists are now doing their research 'at home' (see Caputo, 2000). Bourdieu (1988: 778) also characterises the division between sociology and anthropology as an 'absurd' one that inhibits the genuine cross-fertilisation of ideas.

Interviews open up spaces for telling stories that would not easily be heard in other contexts. Stories about transitioning across gender are an example of this kind of marginal story. In my own research I had to work hard to create a 'safe' space in which marginal stories could be explored. The potentially sensitive nature of my research topic meant that I considered it necessary to use a structured interview format with clearly delineated questions. This format had the added bonus of giving me credibility in the field. It indicated to potential respondents that I was open to exploring a range of ideas about transsexualism and that I was interested in transgender politics. Several respondents commented that they had decided to participate in my research because it was the most interesting 'questionnaire' that they had seen. The interview schedule (see the Research Appendix) was divided into three sections. The first section explored issues of community and asked respondents to detail their involvement in the local transgender community. The second section asked people to respond to extracts from various texts that attempted to represent the experiences of transgendered people. These extracts were assembled together from disparate sources such as popular magazines and transgender, feminist and medical literature about transsexualism and transgenderism. The schedule demonstrated the range of reading that I had done and my perception of debates among transgendered people. The third section asked questions relating to use of, and knowledges about, medical technologies associated with transitioning across binary gender categories.

Twenty-four people from Australia and New Zealand participated in the study.⁷ People were recruited through a variety of strategies including: advertising in local publications, information sheets left at relevant social agencies, attending social gatherings, contacts established at conferences, by email and through friends of research participants. I conducted face-to-face semi-structured interviews lasting approximately two-and-a-half hours each with most of the participants. Participants were given copies of the interview schedule prior to the interview. Only two people did not read the questions prior to the interview and most people had written pre-prepared answers on the interview schedule that they then referred to during the interview. Access to the interview schedule meant that most people who participated

⁷ The transgender communities in New Zealand and Australia are not large enough to ensure that respondents who wish to remain anonymous will not be identified. Throughout the thesis I have tried to blur national and state differences between the people that I interviewed in order to ensure confidentiality. For this reason New Zealand respondents are not identified separately in the thesis. In Chapters Eight and Nine, which locates respondents in New South Wales, new names have been used for some participants who appear in other parts of the thesis.

in the research offered responses that were well thought out, often theoretically informed, and grounded in their own experience(s) and their experiences of interactions/conversations with others.

Pilot interviews were conducted with three New Zealand participants, two interviews developed out of personal contacts and through an introduction from one of these contacts to a person via email. One Australian participant was recruited through an email address provided at the bottom of an article and another telephoned me the day that I moved into my accommodation at Sydney University. Advertising through the magazine *Polare* and leaving copies of an information sheet about my research at the Gender Centre secured six participants. Attending conferences led to five contacts, introductions through other people facilitated contact with another five participants, and attending social gatherings led to contacts with three participants. I interviewed four people who identified as FTM and nineteen who identified as MTF. Of these people, three MTF and two FTM respondents also said that they were 'biologically' intersexual. One person identified as 'spansexual' - claiming neither a male or a female identity. The majority of respondents were European, four were Maori and one was a Pacific Islander.

I designed the interview schedule so that the people I interviewed could answer the questions, or comment on the texts, without giving away too much about their personal biography. I also made it clear, at the time of the interview, that they were welcome to draw on personal experience, but did not have to include it in their responses to the interview questions. I did this because I was aware that some of the questions touched on potentially sensitive topics. In any event, all of the people that I interviewed did draw on personal experience and openly volunteered information about such deeply personal topics as their sexuality and anatomical gender status. The following extract from Melanie's interview provides an example of the kind of personal information that informants disclosed to me:

I am not a male, I am not a female, I've got hormones from both, which most people have anyway; mine are more in the female side even before I took hormone therapy... I have still got the male genitals so I am still genetically classed as a male. I use the term transgender mainly because I don't feel like a male and I don't really feel like a female, I'm me, I'm a person... I feel happier within myself since I changed over and living the lifestyle, than I did when I was playing the role, acting out being a man. I was a poor man anyway as far as sex (was concerned) even with the genitals that I have got didn't really work

and size wise was below average. There is too much emphasis, most people talk to me about the change, one of the first questions they ask is: "Have you had the op?" Or: "how do you have sex?" All they are thinking about is the act of sex not sexuality, or how you feel or anything else. It is strictly: "Have you got tits or have you got a vagina?". Or: "How do you have sex?" And that is all that they are interested in and they can't think any further than that.

Melanie, MTF, 1997

Some respondents were post-operative and 'in the closet' about being transsexual. Most of these people contacted me via my advertisement in the Gender Centre⁸ magazine *Polare*. I also met two of these people at the Gender Centre. The people whom I interviewed who were not openly transgendered entrusted me with their secrets about their former gender and/or transsexual identity and past experiences. As I had designed the interview schedule in a way that enabled people to respond to questions without drawing on individual experience, the sharing of personal information during the interview turned out to be a welcome addition to my research.

The usefulness of providing people with prior access to the interview schedule was demonstrated in Jude's interview. This interview was the only one that I did on the spur of the moment, where the person that I was interviewing did not have prior access to the questions outlined in the interview schedule. This situation arose because I met Jude in the afternoon at a conference and if I was to interview her it had to be that very evening or not at all. I chose to talk to her without following my usual practice of giving participants the schedule to read before the interview. During the interview I became aware of the inappropriateness of some of the questions on my interview schedule. The first of several questions in the schedule which I thought might be problematic asks people to respond to a summary of Janice Raymond's position in an extract from an article by Amy Bloom. Bloom (1994: 38) summarises Raymond's position as 'transsexuals are psychologically unstable victims of a society that over-emphasises the roles of sexual insignia (gender) and sexual difference (anatomy)'. It occurred to me, after we had started the interview, that it might be inappropriate to ask someone to respond to this question, along with questions about gender reassignment surgery, when they had not had a chance to read the full interview schedule prior to the interview.

⁸ The Gender Centre is a state funded resource and community centre for people who have 'gender issues'. See Chapter Nine for further discussion of the Gender Centre.

Jude had a copy of the interview schedule and we both went through each of the questions systematically. As each question was completed we were one question closer to what I began to suspect would be a problematic subject. I started to worry about how Jude would react to the first of the questions that I had identified as potentially problematic – the Raymond/Bloom extract. If Jude had not been holding a copy of the interview schedule I think I would have skipped this section.⁹ I remember my mind racing, trying to think of ways to get around it, realising that I could not, and trying out different scenarios in my head. While I was doing this I was barely able to concentrate on the interview. Finally the critical moment arrived – I heard myself apologising for posing this question. The surprising calmness in my voice belied the silent turmoil that I had been experiencing. Jude re-read the question in silence; her reply is reproduced below:

SP: Ok (deep breath, audible on the tape recorder), have you read the 'Transsexual Empire' by Janice Raymond?

Jude: No.

SP: Well, she is not very complementary and this is a quote from her, don't take it to heart, she is only one voice among many others. Raymond suggests that transsexuals are psychologically unstable victims of a society that over emphasises the roles of sexual insignia (gender) and sexual difference (anatomy). How do you respond to these comments?

Very long silence (in which Jude studies the question and I resist the temptation to speak)

Jude: I don't think that Janice Raymond characterises transsexuals as unstable, she is able to see the folly of a rigid sex/gender system. The only thing I see as a little bit of a problem is in relation to her analysis of identity. To be a woman you must have a particular type of genitalia that is not surgically constructed. She buys into a cultural ideal of what a woman is, what makes a woman. Does she see herself as being just as constructed?

SP: No. But then again it was written in the 1970s.

Jude: No, I didn't think so, natural?

SP: Yes, well essential woman, whereas she might characterise transsexuals as inessential or not natural.

⁹ The problem here is that I felt that Jude had consented to the interview without having had time to read the interview schedule in private and to make a considered decision to participate. I did have one incident in which a person initially agreed to an interview and subsequently decided not to participate in the research after I had given her a copy of the interview schedule.

Jude then brought up the subject of cosmetic surgery as a way to construct a 'natural' female body, and relieved, I skipped to the questions relating to this which follow the section on Raymond and Bloom in my interview schedule. Jude's response indicated that, even though she had not read the *Transsexual Empire*, she was knowledgeable about Raymond's argument. This is not surprising, given the way that academic texts tended to circulate in the inner Sydney 'transgender community'.

To my immense relief Jude responded much more positively to the question than I had expected. I had anticipated that the question would invite Jude to step into the position of a 'psychologically unstable victim'. In saying, 'don't take it to heart', I indicated to Jude that I had identified aspects of this position with her. The above interchange was an unforeseen response to a research strategy that involved going through a long and sometimes complex interview schedule together. With the benefit of hindsight I now realise that my concerns about Jude's reaction to this question were not well founded. Going through the interview schedule together meant that Jude knew that this question was not directed specifically at her, because this question was addressed to all the people that I interviewed. This interaction does highlight, however, that the strategy of giving respondents prior access to the interview schedule meant that I was more confident about asking people to respond to potentially personal and controversial questions. I also relied on their reading of the schedule to be aware that I was interested in their response to a variety of political commentaries on transgender and gender reassignment technologies.

Cautionary tales

The major drawback with the interview schedule was that its academic focus blocked access to people who were not familiar with the ideas that it contained. There were also some cultural barriers. For instance, I spoke to one Samoan Fa'afafine and four Maori sex workers: My experience of interviewing indigenous migrants who had gravitated to Sydney in order to 'escape' social expectations within their own cultures¹⁰ confirmed for me that the academic focus of the interview schedule did not reflect the complex social issues and different interests¹¹ of these people. The sex workers were

¹⁰ Pacific Island transgenders could be sexually active and access gender reassignment technologies in Sydney more readily than at home. The Sydney-based Maori transgenders that I spoke to talked about escaping whanau (family) obligations.

¹¹ For example, inadequate housing, concerns about HIV/AIDS and other STDs, violence, drug addiction and police harassment.

able to talk without difficulty about their life worlds and to identify some of the external factors that locked them into the sex industry.¹² Through their contribution to my study, for example, I was able to better understand the geographical divisions and surgically based hierarchies that existed in the Sydney community. I quickly realised, however, that the complex networks that organise the worlds of the transgendered sex workers could not be added on to this thesis – this topic would be a thesis in its own right.

The sex workers I met in Kings Cross used me as a resource and asked me questions about breast implants and other medical technologies and the ‘politics’ on ‘the other side of town’ (a colloquial expression meaning Newtown and the Gender Centre). Interestingly, other Sydney-based sociologists told me that transgender sex workers would not talk to me because they had a history of non-cooperation with researchers. Undeterred, I introduced myself to a contact whom I knew sex workers would trust and arranged for that person to introduce me to a sex worker who could set up interviews on my behalf. This person did this, distributing interview schedules and arranging the three interviews that I did in quick succession (two in one day and one the following day), before I told my contact that the difficult (social) issues and different interests of the sex workers that I had interviewed meant that I needed to go back to the drawing board with my interview schedule. As I said this, I was aware that conducting research in a different country over the October-February University break, when the Ethics Committee at Canterbury University meets less frequently, meant that realistically I would be unable to produce a second interview schedule for the sex workers before I left Sydney in February.

As the number of interviews that I completed accumulated, and I became familiar with the range of possible answers for particular questions, I began to think that the interview schedule was too rigid. This was because it resulted in fragmented personal stories that ultimately became frustrating. I became increasingly interested in the biographical details of the lives of the people that I interviewed. The research

¹² For example, some transgender people who had recently arrived in Sydney, and therefore were not Australian citizens, could not get access to welfare benefits. This forced them onto the street and into the sex industry. Lack of demand for the services of post-operative MTF sex workers meant that pre-operative transsexual sex workers were prevented from having surgery if sex work was their only means of income. Those who wanted to have surgery, and were saving for this eventuality, needed to be able to exit the sex industry following their surgery. Their marginal status as transgendered, combined with discrimination, a lack of personal contacts outside of the sex industry and scarce economic resources, meant that exiting the industry was not a realistic option for the sex workers that I met. (I met and talked to more sex workers than I interviewed – all of them were either Maori or Pacific Islanders).

questions gave me access to tantalising components of participants' biographies. These stories were however, limited to aspects of their lives that related to particular questions. I did not pursue too much biographical detail during the interview as I was aware of the length of time that it took to go through the questions and had to force myself to keep to the arranged format. I was also aware that the information sheet I had distributed did not suggest a focus on the personal life stories of participants. I did depart from the interview schedule on one occasion and recorded a life history instead. I had given Robyn a copy of the interview schedule prior to her interview. When I arrived for the interview Robyn confessed that she had not read the interview schedule. My motive for asking Robyn for an interview was because I had observed that she was a good story-teller. I decided to abandon the interview schedule altogether and let her tell me how she came to be involved in the transgendered community. This decision resulted in Robyn's story, aspects of which are reproduced in the following chapter.

Feminist theory as resource and constraint

Feminist theories about gender and transsexualism tended to work in my research as both a resource and as a constraint. At times, being a 'feminist sociologist' was not a subject position that I felt comfortable claiming in the interview situation. Wendy, for example, provided me with this direct challenge to academic theories about transgender identities which she considered to be incomprehensible to most lay people:

I am not a believer in a single construct of transsexualism. I am a believer in people's right to choose. There is an incredible arrogance of dictating how people should live and should create identities, in relation to transsexualism, amongst academics...I have a real problem with this power/knowledge thing within the academy. It is greeted by blank incomprehension on the street. The two [academics and non-academic transgenders] are opposite ends of a continuum.

Wendy, MTF, 1996

At other times being a feminist sociologist was a subject position that I could use as a resource. Some of the people whom I interviewed thought that my position as an academic meant that I could engage in feminist debates on their behalf, and be taken seriously by other feminist academics because I was a 'woman'. The thesis was made possible because of a rich history of sociological, feminist and queer theory writing about transgender/transsexual issues (Garfinkel, 1967; Epstein, 1990, Hausman, 1995). But my research was also constrained by the baggage associated with some of

the less sympathetic feminist literature on transsexualism¹³ - or rather some of the people I interviewed perceived the feminist literature as predominantly negative about transgendered/transsexual people. Some of the people I interviewed had also experienced hostile reactions to their transgender status by people whom they identified as 'feminists'. Norrie May Welby, for example, responded dismissively to the question about Janice Raymond's work discussed previously in relation to Jude's interview. The following interview extract explores my attempt to draw out a more considered response from Welby by pointing out some of the more useful aspects of Raymond's work. Welby then goes on to describe Janice Raymond's early feminist analysis of transsexualism as 'alienating':

SP: One of the things that I quite like about Janice Raymond's book is the fact that she says that society over-emphasises the connections between gender and anatomy. She puts that on the agenda way back in the 1970s, and it has taken a while for transgenders to tune into that, but they have now and transys are starting to get politically active and to develop ideas within queer theory in the late 1980s and 90s.

NMW: Well, it is not surprising that we were not too friendly to her views given how much she alienated us.

SP: Yes, she is incredibly hostile.

NMW: She didn't seek the obvious allies. I mean transys are the obvious allies [to feminists] in the breaking down of gender. As transys have seen feminists as obvious allies in the breaking down of gender.

Norrie May Welby, 1997

Doing research, as a feminist sociologist against a background of radical and lesbian feminists' critiques of transsexualism, meant that I was often too anxious to clarify my own position in relation to these discourses. In agreeing that Raymond's work was 'incredibly hostile' I was attempting to maintain empathy by indicating that I was not in total agreement with her analysis.

If I felt ambivalent about identifying as a 'feminist sociologist' in the research setting, one subject position that I could not avoid was that of a female/woman interviewing people who identified as transgender, or who currently or previously

¹³ Janice Raymond's (1980) *Transsexual Empire* is the classic example. Also see Germaine Greer's (1986) review of Jan Morris' 'Conundrum' in 'The Mad Woman's Underclothes'.

identified as transsexual. Within feminist methodological debates feminist research has been classically described as research by women, for women, about women (Stanley and Wise, 1990: 21). The focus of the research process is on consciousness raising with a view to changing women's lives (Stanley and Wise, 1990: 21). Deconstructing the hierarchical opposition whereby the researcher is the knower and the people who participate in the research are the known (du Bois, 1983) has also been a project of feminist research. Within feminist literature there are examples of texts that discuss the pleasures and difficulties of women interviewing women (Oakley, 1981; Finch, 1993; Bloom, 1998). There is also discussion of the difficulties of interviewing across ethnic (Edwards, 1990; Song and Parker, 1995) and class barriers (Stacey, 1990). In the sociological literature there are examples of methodological texts about men interviewing men (Hearn, 1994; Plummer, 1995; Flood, 2000) and examples of research across class (Willis, 1977; Newby, 1977; Connell, 1995) and ethnic (Wacquant, 1998a, 1998b) barriers. In all of these examples, gender is a given category. There is an assumed empathy between researcher and informant based on gender similarities. There are examples of the difficulties associated with women doing research about men's lives (Layland, 1990; Scully, 1990; Fitzgerald, 1996; Elizabeth, 1997) and women have also produced text-based analyses of masculinity (Ramazanoglu, 1992; Bordo, 1993b, 1999; Tait, 1999). Researching across gender, gender becomes problematic (Layland, 1990), although the binary categories themselves are not in question. Michelle Owen's (2000: 56) research on queer community activists indicates that she interviewed people who did not identify as either male or female. However, she does not reflect on how this impacted on her research process and methodology.

Some feminist researchers have argued that 'friendship' rather than distanced objectivity is the condition for good research (Oakley, 1981). Bloom (1998: 152) acknowledges the difficulties of this utopian model and instead advocates a friendly-stranger relationship that is maintained only during the research process. The respondents in Bloom and Munro's (1995) and Bloom's (1996, 1998) research were educated professional women who had a common interest in participating in a collaborative feminist research project. In my own research, apart from a shared experience of medicalisation, I initially felt that I had very little in common with the people I interviewed. Their life experiences were very different from my own. Some people told stories about violence and discrimination that shocked me. Some saw feminism and feminist criticisms of transsexuals as contributing to their

discrimination. Despite these differences, it was possible to come across similarities in our experiences.

FTM respondents shared with me a personal history of being female. In interview situations that common history provided an important point of connection. All of the FTM respondents with whom I talked had experiences and opinions which were available to them because they had lived as women. One of the FTM respondents, for example, had been married, another had given birth, and another had been raped. Their world views often incorporated feminist critiques of patriarchy and reflections on forms of 'male' discrimination against women made all the more painful by their exposure to these ideas in the worlds that they now moved in. Despite these commonalities, we were also very different. FTM respondents moved in worlds to which women do not normally have access. In order to survive in these worlds they had learnt to move, dress and talk like 'straight men' (to be seen as effeminate, and therefore possibly gay, could invite unwelcome attention). They talked about the fear associated with their lack of social and embodied competence when moving in these worlds for the first time. They had a degree of pride in having mastered the initially confusing codes of behaviour required in male-only face-to-face interactions. Every day they faced potential violence should their transgender status be exposed. This meant that they always had to think ahead and to monitor the situations in which they participated. Concern about the consequences of exposure meant that the female designation in the passport of an FTM whom I interviewed, combined with the thought of being body searched, made international travel too risky – a personal freedom that many people simply take for granted.

I shared with MTF respondents a common social identity as women, but different personal histories as male and female. All of the MTF respondents talked about their former lives as men. Some had married and/or fathered children and two had been in the armed forces. Most commonly they reflected on how they were never comfortable or happy as men. I did feel a sense of connection with their talk about being reprimanded by adults when they were young for behaviour that was considered inappropriate for someone with a 'male gender'. This talk reminded me of how I resisted and resented the imposition of forms of conservative feminine dress and behaviour that were imposed on me as a child by my parents. As women we had a similar relationship to the discourses and practices of femininity (Smith, 1990). Some of the people I interviewed were critical of masculinity, drawing on feminist critiques

of patriarchy and heterosexuality in the process. Transgendered people problematise the object of feminist research. If MTFs are excluded from feminist constructions of the category 'women' because they are not born female (Grosz, 1994: 207) are FTMs then to be included by the same criteria? It seems that transgendered people fit uncomfortably into these debates within feminist theory and methodology. Critical analysis of transgender bodies and identities enables a different perspective on the relationship between sex, sexuality, the body, gender and power that may be useful for feminist scholarship. Through attention to the discourses and practices that frame individual experiences of being transgendered, for example, I came to understand that it is important to explore how particular definitions of sex and gender are used in the mobilisation of resources, actors and networks. In Chapter Eight the Federal and State legislation regulating transgender bodies and identities is used to explore how sexed identities are regulated by modern state(s). In that case, localised gender identities, differentiated by place of birth, are constructed through non-local state and federal legislation that specifies how the sex designation on the Births, Deaths and Marriages register is to be administered in different state and national settings.

Interpretation: reproducing narratives, consuming stories

...writing is to some extent blind, that it cannot know the hands into which it will fall, how it will be read, and used...
 Judith Butler (1997: 8)

Judith Butler suggests that audiences bring diverse experiences to reading that enables texts to be interpreted and used in new ways. Ken Plummer (1995: 22) also notes that the meanings of stories are not unitary or fixed. Rather, they shift according to the contexts in which stories are produced, interpreted and read. I chose particular narratives from the interview material because they could be read in a variety of different ways or because they illustrated particular themes at work within the thesis. The thesis was not driven by a specific set of theoretical ideas. Nor did I collect the interview material and then cast around for ideas that I could employ to 'explain' my data. In the initial stages of researching the thesis I was immersed in the literature on transsexualism and a set of theoretical problems focused around issues associated with narrativity, agency and corporeality. In the months following the field research I was absorbed with the mundane task of transcribing the interviews and identifying narratives or fragments of stories that illustrated these earlier theoretical concerns –

this work became chapters two, four, six and seven of the thesis. I was left with a larger set of narratives that extended beyond the agendas that initially shaped the thesis. These narratives related to the local, state and national contexts that influenced interaction in the research setting in which the narratives were produced. This material was eventually incorporated into chapters five, eight and nine.

The thesis contains detailed accounts of Robyn's story in Chapter Four and Norrie May Welby's interview in Chapter Five. Robyn's story is reproduced at length because it brings together most of the themes and issues that were the initial focus of analysis in this thesis. Dreger (1998: 167) notes that there are few personal archives of patients, let alone intersexuals, in the social history of medicine. For this reason it seemed appropriate to dedicate one of the substantive chapters to Robyn's story. I have also dedicated a chapter to the analysis of Welby's narrative because s/he provided wonderfully articulate and complex narrative about the doing and undoing of transgender identities. I felt this complexity would be lost if this narrative was split across several different chapters. The first version of Norrie May Welby's interview sat in a computer file for several years as I was reluctant to impose an analysis on an interview that provided so much interviewee analysis. I knew that I wanted to use performativity theory in my analysis, but it was not until I decided to use the ideas of both Judith Butler and Pierre Bourdieu that I found a way to condense and analyse this interview.

The remaining substantive chapters in the thesis contain extracts of narratives selected from different interviews. In these chapters I use material from the interviews to raise questions and indicate alternative ways of theorising about the social practices surrounding changing sex and/or transitioning across gender. The purpose is to provide a sense of the similarities and differences in the narratives of participants in order to compare and contrast different opinions on the same issue. My research is not meant to be representative of the experiences, discourses and practices of the total population of people who identify as transsexual or transgendered. Instead of generalising from these examples, I focus on specific cases that problematise theoretical and cultural generalisations about transgender embodiment and its relation to the discourses and practices of sex, gender, embodiment and medical technologies.

The 'litmus test' for any piece of research is how it is received by people whose experiences are reflected in the study or who are familiar with the community on which the investigation is based. Readers bring different experiences and agendas to the way that research is 'read'. A reader may scan a text not only for what is included but also for what is omitted or silenced. Leslie Bloom's research generated the later experience. I read Bloom (1998) with a growing sense of unease about what her analysis meant for the process of interpretation in my own research. I scanned Bloom's text primarily as a feminist sociologist interested in issues of narrativity. But I also read her work as a person who has received a kidney transplant. Bloom mentions that Sandy, one of her key informants, has also had a kidney transplant. This significant aspect of Sandy's life is unexamined - silenced. There is no discussion about why Sandy's illness narrative is absent from Bloom's texts (Bloom and Munro, 1995; Bloom, 1996, 1998). I wonder who made the decision to exclude this narrative - Sandy or Bloom? I recognise in Sandy's narrative aspects of my own experience and I wonder how much Sandy's experience of illness frames her narratives about career and gender relations. Bloom's (1998: 144) resolute attention to gender and sexuality as central analytic categories forecloses the possibilities of an alternative interpretation, one that explores the impact of illness on identity in the context of a culture which values health. As a result of this experience my attention was drawn abruptly to the reader of the text - my text.

With my reaction to Bloom's book fresh in my mind it was with considerable apprehension that I let chapters of this thesis be read by people who had expertise in this area or who had contributed to the research. Elizabeth Riley, the education officer at the Gender Centre in Sydney, read and verified the factual details in Chapter Eight. A Christchurch based MTF provided ongoing feedback and encouragement during the writing of the thesis. Craig Andrews,¹⁴ a FTM who participated in this research, read and commented on chapters two, four, five and nine. After Craig had read Chapters Two and Four he chose to offer the following comments about narrative conventions among transgendered people:

Being tg/ts myself, there is an enormous temptation to play about with the narrative. And one we are encouraged to do so especially in that first appointment with the endocrinologist. "So, tell me about your childhood"... The temptation is to embellish, enhance all those appropriate [male] gendered behaviours, and diminish all those other [female] gendered

¹⁴ Craig Andrews real name is used with his permission.

behaviours in the narrative we tell about 'how we came to be who we are today...'. I think it is also about wanting a sense of a cohesive personal narrative. One that lends history to our sense of being. I recognise in my self a reluctance to speak, however confidentially with researchers, into the FTM experience, because ultimately I have to tell a story about my process, my history etc. And rather than feel that I've been selective in telling that story, I don't even bother. The more I tell a story, the more I think I'll reshape it. And to be really honest with you, that scares me. The urge in one is strong to make sense out of one's life. Naturally - that goes for everyone (doesn't it??). We want to make sense out of our lives? And honestly there are lots about the stories of tg/ts folks which just does not make sense. Which you cannot make sense out of. And that's scary. To not be able to make sense out of your lived experience...??... That's really uncomfortable. Narrative is such an interesting phenomenon amongst tg/ts people. The shifts of those narratives, the little embellishments that creep in. There is probably tons of stuff you would not have been told, no matter how much you think you were told. That's what narrative is all about. That's what interviewing is all about - and that is the drama of ethnography. You have some very interesting narratives from tg/ts people who have re-written and probably continue to re-write their lives. Tg/ts people badly want an 'about me' story like anyone else on the planet, and they're doing their best to write that narrative.

Email correspondence, Craig Andrews, September, 2001

Craig's comments are relevant to an analysis of the place of narrative within post-structuralist theories and the lives of transsexual/transgendered individuals. If identities are shifting and contingent, and different settings require the enactment of different relational selves, then the narratives about self that we tell in those settings will also shift and change. Craig suggests that transgendered people are actively engaged in reworking their identities and rewriting their histories - in many cases these modifications are ongoing projects. These comments illustrate the ways in which interviews are social encounters that involve much more than simple exchanges of information. Sociological inquiry is as much about what is omitted as what is included in stories that are told through research. Some of these issues are taken up in the following chapter of the thesis.

Changing bodies; shifting genders

Robyn's Story

Do we truly need a true sex? With a persistence that borders on stubbornness, modern Western societies have answered in the affirmative. They have obstinately brought into play this question of “true sex” in an order of things where one might have imagined that all that counted was the reality of the body...

Michel Foucault (1980: vii) *Herculine Barbin*

Introduction

I first met Robyn in the mid 1990s at a support group for people who identified as transsexual or transgendered. I approached her for an interview after listening to her talking to the other participants in the group. Robyn had a knack for telling stories and it was this quality that I was interested in capturing on tape. I arranged to come to her house the following week and we sat around her kitchen table and drank numerous cups of tea while she talked about everything from her life story to physics and building plans. It was my decision to abandon my interview schedule, and ask Robyn to tell me her life story, that gave her the space to narrate the incredible series of events that led to her eventual decision to change his/her¹⁵ social gender. ‘Robyn’s story’ is comprised of extracts from this interview.

Robin was born in the 1920s. He started life as a male and lived for more than 60 years as a man. He went to a boys’ school, played rugby, was drafted into the army in World War Two, married and fathered four children. Medical intervention following an accident in his backyard in the mid 1980s revealed that he had one testicle, which had stopped functioning as a result of the accident, and one ovary which had begun

functioning as a result of his lower testosterone levels. Robyn also had a partly formed uterus. Eight months after the accident doctors informed him that he was a suppressed female hermaphrodite. Robyn's interpretation of this conversation is that the doctors informed him that he was a 'girl'/woman. Robyn initially tried to prevent the feminising effects of the female hormones emanating from his one functioning ovary by taking male hormones. This strategy, however, turned out to be unsustainable as the 'artificial' male hormones interfered with his general health. In the early 1990s Robyn decided to change his social gender to that of a woman. At the time I interviewed her, Robyn had been living as a woman for several years and was nearly 70 years old.

Robyn's story is both extraordinary and mundane, it traces the life trajectory of a male from boyhood to adulthood and beyond that is not unusual; in fact it could be interpreted as a typical story, one that could be applied to many men born in the 1920s. Robyn's story is also remarkable in that it recounts the story of a body that 'accidentally' changed gender. Robyn's story is unusual because s/he overtly re-interprets his/her history in light of new knowledges about his/her body. Old narratives of identity, based around stories associated with masculinity, rugby, war, work, marriage, and fatherhood, become problematic in light of Robyn's new knowledges about his/her body. Unable to keep these particular narratives of identity going Robyn reinterprets his/her past in terms of a new narrative of identity; one that privileges femininity. His physicality, marriage break-up, emotionality, disinterest in girls and lack of acceptance as 'one of the boys' become resources for her to construct a 'continuous' narrative of femininity that predates his/her medical diagnosis.

This chapter has three interrelated levels of analysis and interpretation that broadly correspond to issues of gender, biography and methodology. Robyn's life history provides the context through which a methodological discussion of the issues associated with doing and presenting life histories is explored. Two stories emerge out of Robyn's narrative: a man's story centred around work and masculinity and a woman's story centred around embodiment and the social practices associated with doing femininity. Robyn defines herself, and inhabits a social world, in which s/he

¹⁵ The pronouns he, she, s/he his/her are used interchangeably in this chapter. They reflect the fluidity with which Robyn refers to his/her gender in his/her narrative and they illustrate the difficulties of

constantly moves from one gender to another; physically, psychologically, linguistically, socially and symbolically. As a result, Robyn's narrative is a destabilising one that constructs an identity that is shifting and contingent in which words and images can give only an approximate view of Robyn's identity and experience.

Robyn's experience of gender is deeply grounded in his/her relationship to his/her body. An argument is made about the relationships between biography and public narratives of medicine, sex and gender. Robyn's story speaks to the construction of essentialism both at the personal level and in public medical discourses and practices associated with gender reassignment technologies. Robyn defines herself by bringing into play a complex narrative about medical knowledges, biology and personal biography. Her slight build, lack of facial hair, the shape of her pubic hair, use of hormones to maintain her body shape and issues associated with menstruation and menopause are all important to the way that Robyn attempts to rework her old male identity and construct a new female identity. Robyn's marginality allows her to reflect on the construction of her gender identity. Rather than being an exception to binary notions of gender, her narrative clearly illustrates the interaction between bodies and gendered conventions. It is possible to see Robyn not as peripheral to binary notions of gender but as an example of how gender identities come to be codified, constructed and crafted in the everyday practices of individuals.

Robyn's Story

My involvement in the transgender community is something I got forced into in actual fact. It wasn't actually a desire of mine, and I actually tried to prevent it happening for nearly three years. But (it) wasn't medically possible you see and so here I am about half way there. Do you want a history of me?

SP: Yes

First of all the tranns that I know don't know why I'm a tranny in that sense. They believe that I'm like most of them, whereas in actual fact I'm not. I'm actually a biological woman you see and always have been. But nobody knew, until mid-1986, when, we still didn't know then, or I didn't know then, in fact nobody knew then because I hadn't even presented to the medical profession to wonder what was going on. But what actually happened was, I had an accident on the scaffolding outside. It was scaffolding that I made myself, you know with no railing or anything, and I fell from the top of it. What actually happened was that I had an accident out there which damaged my genitals you see, and at the same time I dislocated my right knee - pulled it almost right out I think. Of course, I got a lot of bumps, a bleeding head and nine or ten big splinters from this decaying timber. Because it was rough sawn stuff that had been in the house of a friend of mine's ceiling for years, and he put a second storey on, and I got all this old left over wood, so you can imagine what the scaffolding looked like.

gendered language in so far as there is no satisfactory intermediate term.

Well what actually happened was, I'd worked all night you see, at that stage I was doing some shift work, and because I went to sleep at about 2pm of an afternoon and got up at ten to go to work I would spend the morning until lunch time fixing up the house. It was a little bit of a foggy morning and there was dew that had settled on planks and run-off from a leaking gutter had also wet the top of it you see. And I was rearranging the planks. I carried two of these long, wide and thick planks, up on my shoulders, and when I got to the top I had to swing them around you see, and they scissored on me, you know they came apart. One of them hit the house and knocked me off balance and I slipped on this blooming wet wood on the top of the scaffolding and fell off backwards - head first. My right ankle went into the one of the scaffolding supports and it locked there. At this stage one of the two planks had been very diligently following me down there end on, and it went straight between my legs and wallop! Of course I let out this unholy blooming yell, and I don't know whether I was unconscious at all but all I know is that the next thing was my neighbour was leaning over the fence saying: "Are you all right? Are you all right?"

And I said: "No. Come in here and get me out of this."

Somehow-or-rather I got one arm underneath at a funny angle through the scaffolding you see, and there I was with this blasted timber plank between my legs, my foot still locked up in the thing with virtually no skin around me ankle at all anywhere, all these splinters in me and head pouring blood out of it, and the knee out of joint there was nothing much I could do.

My neighbour couldn't move me, she's only a small woman like yourself, she couldn't do it. So she flew into the house here and rang up her son who works close by and he come flying down and they got me out and bundled me into his big car up the hospital you see. The doctors were concerned about my knee, attending to all me cuts and abrasions and removing all the splinters you know, shaving a bit of my hair off and stitching up the wound in the tip of my skull and so forth. And of course I was black and blue and mauve all around here too, you know they said you will be walking around with stiff legs for a while, which it was true. But nobody thought that there was any actual physical damage done of the nature that did happen and of course it had destroyed one testicle and there was only one there to work as it so turned out, it took years to find that out from September to May. (*meaning 57 years of living as a male, and then the months following the accident*)

Nothing happened then until I sort of was having funny night sweats and insomnia and all sorts of things. But I didn't put it down to the damage that had been done on the day that my neighbour had carted me off to the hospital to put my knee back in and so forth and fix up all the scratches. It took till January the following year before I presented myself to a doctor about this. And the reason I presented myself was that the previous Sunday evening when I was bathing I noticed that one of my genitals, the right one, was about 3 times the size of the other one, and I thought my goodness there's trouble there. So the next day I presented myself down at the local clinic where my doctor was, and she examined it all and everything, and they took x-rays and they wouldn't tell me the result. And then they asked me if I'd come in and have some ultra-sounds done on the scrotum and so forth, which I did. Then they asked me if I'd go into hospital and have a CAT scan of my lower abdomen you see, which I also did. They took little bits of fingernail, and pinched skin off the end of my ear, and some hair and a few other things, and a whole lot of saliva. Anyhow it took till May when the doctor rang me up on my day off, it was a Thursday. And she said: "What are you doing this morning?"

And I said: "Oh nothing particular much."

She said: "Oh we have got some results of all these tests."

You see, because they had been putting me off for months and I couldn't understand why they were putting me off.

She said: "I'll come and collect you because we are going to the Hospital to a couple of specialist guys in there."

So she came, and I got ready in the meantime, and she arrived and we drove in to the hospital. There was a geneticist there and a couple of other characters and a psychologist. Anyhow they were sitting on the side of their table and my doctor and I sat on this side, fairly well apart. The psychologist was up one end, and he started just talking to me and the other three were talking to my doctor. I sort of wasn't listening, well not properly because I was talking to this other man. He was questioning me about my youth and, and how I got on at school and all sorts of things, what I thought when I came out of school, whether I

liked girls and all this sort of thing. I was getting a bit uptight after about three quarters of an hour of this, and eventually I said to him: "Listen, now what did we come in here for?"

Just like that you see. The Professor in the middle he just said to this man, they had obviously called him in you see: "What do you think?"

And he said : "Yes, I think he'll be alright".

So he then addressed me, and he said: "Well Robyn what we have got you in here for is that there is no cancer or anything like that. But the only trouble is you are a girl." (Laugh)

I sort of said: "WHAT?" (Laugh).

Anyhow what it appears to have happened was that I was what they called a suppressed female hermaphrodite. I had one ovary and a fallopian tube and something that looked like a bit of a uterus, but non-functional stuff, no vagina of course or anything external. I only had one testicle, the left one, and the right one was a little bunch of cysts, like a little bunch of grapes, and when I bashed them apparently they developed. They (the cysts) apparently were not there at all, and I never knew prior that I only had one testicle and of course I thought it was rapidly growing cancer obviously. But in actual fact that is what had happened, and of course the tests had proved that the original accident had stopped the testicle working and the result was that my hormonal balance was now going the other way. This single lousy little ovary was doing its job for the first time in its life and that is why I was having these silly problems you see, being emotionally upset and what not, it is the same thing as hormonal withdrawal you know. There wasn't enough of either (hormone), so after some discussion and explanations by everybody in their turn they said, you know you have only really got one choice and that is to have a double mastectomy when there is sufficient development for us to be able to do it, including the removal of the 2 ribs to get at all the glands that are underneath inside the rib cage as well, because of the bit of hormone, they generate female hormones, and a hysterectomy including the fallopia and an ovcetomy, or whatever they call it, and of course I wasn't too keen on all of that. And so I said: "What is the other alternative, or is there another alternative?"

And he said: "Oh yes, we can fill you up with testosterone and keep you the way you were."

And so they tried that for nearly three years actually, but it failed in the end. As the process went on I guess the hypothalamus and pituitary gland at this stage found out what they were there for and were doing the right thing for a change, after all these years. You see when that accident happened I was 57 years old at that stage. In the end when they decided in early 1994 that if they kept giving me this artificial testosterone, at the level they were now giving them to me in you know, that they were going to do a lot of other damage. The liver didn't like it very much, and I don't think, although the kidneys weren't quite so bad, they were not behaving well either at that stage. So I said alright let it happen, so they stopped that. They have been fiddling around ever since with different dosages of both the two hormones to stop things going mad basically, and so I'm a girl.

SP: This is unbelievable, that is an unbelievable story!

Yes, well unbelievable stories are unbelievable and that is why they are true. But so then of course, ever since then I've been going to see this same psychologist fellow and attending the clinic, because they have to treat me like a transsexual you see, basically because there is no other way. So I've just been sort of learning the ropes basically and having to forget something like 62 years of being a bloke and learning some of the habits of women but I tell you what, it is a lot of hard work and I make a lot of mistakes.

SP: So how did your family react to that?

Well my mum and dad are in their middle 90's you see and I have not told them. The rest of them are OK. I'm not really sure, maybe, I mean I did have some female traits, there was no doubt about that. Prior to that, like I didn't have any body hair for example, and, although I didn't realise it at the time, the female tract of puberty hair, you know straight across the top and the triangle, and down, instead of the diamond going up to the navel which the males have, I don't have that you see, I've got small feet and so forth. I'm not a big strong person and never ever was, even though I played football and trained at the gym and everything. I never really developed any big muscles no matter what I did, but I never put them together, and nobody else put them together to say there was something wrong with me, or something different, not

so much wrong I guess as different. But anyhow the kids are bit, oh what would they be, they get embarrassed a bit when they have to introduce me as a woman, and their father, to their friends for the first time. Now that is a little dicey on it and I can understand that too. If you were a son and introduced me to someone, meet my Dad - and it is a woman standing in front of them and without explanation, what do those people think? Straight away they think I'm a queer, or something-or-rather. You know, why are you like this Dad? And the answer is I don't know son. So that is it, but I haven't told Mum and Dad. Mum's asked some questions at different times and I've always been able to conjure up a suspiciously evasive answer. You know she questions some of the clothes I wear you see, and the long fingernails and the hair down here. And she is always going on about the blooming hair you see. Of course originally when I was first going through all this testosterone and everything like that I had my hair cut in a normal masculine manner you know. But when I knew that that was going to be off, I let it get a little bit longer like the modern guys do, but not like down here where it is now. They were saying well you know you have got to practise being a woman.

The first time I wore a woman's dress and so forth and walked down steps I thought everybody in creation was looking at me. It was very embarrassing to me internally but most people didn't even notice, you know just walked past. But you get inconsistent things you know. A classic case was when I was inquiring about a bus number down at the terminal at the little kiosk. The elderly gent there, well in his late 50s or so, he considered me a woman and he said yes madam and so forth, and it is there and it's just over there, and he referred to my sex directly several times as female. I went over to the bus and the bus came along. The man in the kiosk had given me about 6 or 7 different bus numbers you see, and I was a little confused when the bus turned up as to whether it was the right one. So I asked the driver and he said: "Yes mate", within 30 seconds of the other one telling me I was a chick all the time. So you get those sort of things all the time. However, they are becoming less frequent.

Lots of people have asked me why I decided to change my appearance to female instead of hiding the female and remaining male. You are not the first to have asked me that. I don't know why. Except that I'm biologically female and I figured there is an adventure to see what happens basically, what will happen. Whether or not I have the surgery done to my male genitals or not is another matter. I'm still not keen at letting them have a go at those either you see. I mean I didn't let them have a go at the female ones, I'm not likely to let them have a go at the male ones am I? But I may. My view keeps changing. Some times I'm very happy to be female and on other days I hate the idea, it is just one of those things, moody women you see, that is what it is.

I was brought up male, I was very much a male, but I was never in the male fraternity. What do I mean by that? In a group of fellows, I was a hanger-on, you know they didn't really accept me. I was as good as them at most things, particularly sport for example. As I said I played football at school. It was a rugby school, a Catholic College, and I was in the first 15 for my age group and then when they got to the senior level I played in the college first 15. Now that school had nearly 1000 boys at it so I was able to do the male things but I was never big. I played the halfback, and of course the forwards used to say, don't worry about it, I was Robin spelt with an 'I' of course to them in school. "No don't worry about it Robin we won't let anybody at you." Because they were giants of kids, when I say kids they were 18, 19 years of age in those days in the senior school, and they were big, they were men particularly the forwards, they were giants you know. And of course they did very well. I very rarely got clouted by anybody I can tell you, occasionally but not often and that sort of thing happened all the time. I got caught (up) in the army and so forth, you know at the end of the war fortunately. They were training me to go to Japan as an occupational troop you know, but the world governments changed the composition of the occupying forces. The company that I was in was disbanded, so it didn't really matter. But I had a commission in the war so I was able to be a bloke and do all the things that men did. Even when I went to work I trained as a radio operator and went to sea on a ship originally, but I came inshore and did all the electronic courses and so forth, and in the end I worked in the telecommunications industry. And I ended up as the principal technical officer, the highest grade you can get in the public sector. They made a special grade for me to do a special job in the last 3 years of my employment. And then disbanded it when I finished the job and I left straight after. So I was able to compete with them, but I was never really one of them you know. When they went to the pub they never asked me to go for example, if I went along it was OK, but they didn't say you have got to come too Rob you know. It is a funny thing I was sort of on the outer all the

time as a male. Of course I didn't have a lot of joy with girls either when I was young neither, because I didn't have very much interest in women, and I guess that was the female bit in me too. You know you don't chase around after girls if you are one, but I didn't know. Of course I didn't court a girl, even though I got married to one. I got proposed to by the sister of a friend in actual fact and I accepted her. And it lasted 30 years, she made a fairly good choice, but I think she may have left because of it. Because we didn't have a row or anything, or we weren't incompatible or anything, everything seemed to be pretty good to me but... (cake in the oven due to come out, turned off tape).

So you see that is what happened to me, but the girls at the clinic they don't know that story, they think that I've always believed, you know like most of us or like most of them do, that they were women all along and wanted to be so. I'm sort of driven to it, as I said I have my on and off days but it is an adventure for me, it is definitely an adventure. I can't say any more than that.

SP: I think that is the most amazing story I've heard. You know 30 odd year married, and you had how many children?

Four

SP: Four. It is unusual for hermaphrodites to be fertile too.

Oh it worked. I worked!

SP: Looking at the medical literature.

Yes that is right, the single left testicle worked apparently very well.

SP: Until you fell off the scaffolding.

But for the accident I might never have known. That is what they say you see, that there is probably, they reckon there is about one in 14 million people that are like me. The reason that the figure is so big is that you have got to have something unique happen to find them because they don't do the genetic tests on children. They lift them up, if it has got a penis it is a boy, if they haven't it is a girl and that is about the end of it. Unless they show signs, if they are intersexed then they show signs of both genitals as a baby. They find out what they really are these days, they might not have in the 1920s but they do now and of course they fix it up, get rid of what is not supposed to be there in the first fortnight or so of life and that is it. But if they had done that with me I might never have had any children. Because I didn't have a vagina and a proper uterus you see. But the thing is I should have just died you see eventually still a male and nobody ever would have known. And they say there is probably quite a lot of us around and they do just exactly that. They are men that are effeminate, or they are women that are a bit masculine, and they die, but if you have something odd happen to you, the you know, sort of turns the switch (then) you are in the business for a change...

SP: So how does that make you feel about sex and gender, I mean you must think they are a bit strange then.

Well yes, I'm not an analytical person in that sense. I'm a technician and I can resolve lots of things logically, but emotional things and so forth like that I don't work out at all very well. Yet you know I used to be jeered at and laughed at because I'd cry at the movies and watching television and so forth, and that was all before it happened you know and they would say ah you carry on like a baby. Was that the lady in me? I don't know. The reason my wife left was for that reason, that she could see something that I couldn't, but she never ever told me and hasn't done so even now when she knows what is what.

I wasn't aiming to be female intentionally. But I'm prepared to accept it. I've always been a realist you see. That is probably why - even though I told them "no I'll stay a male", initially if they had of succeeded I would have. Only I didn't want to ruin my health and stay a male and be sick for the rest of my life so I said well, you know, "stop it". But they had to wean me off you see then, they just couldn't stop like that,

and to some extent they still are because I still have some testosterone and still have some oestrogen type things to take.

They are not sure in my case whether I'm going to go through puberty or not. See as far as I can gather from talking to everybody that most of these do it much younger and they have got a far greater chance of physically transforming to look more womanly if they are going to women, or more masculine if they are going the other way. You can't do anything with old bones. I've had the necessary instructions to say stop growing, as in length and things like that, and of course you can't make a skeleton any smaller than it originally was, and you can't do anything about your throat either, so I'll always have a masculine voice. I mean you can train to speak so you have a higher pitch as so forth, but who wants to work on that all the time. They offer all kinds of operations to shorten the chords and all this kind of thing, but I'm not keen on having a go at that either.

If I ever go the whole hog in this matter, or have it look as though it is the whole hog at any rate if nothing else, well I guess I'm not too sure how clever these surgeons are that do these sorts of operations. If they could gain access to the vagina anyhow or the uterus from the one they make, I don't know if they can do that or not. Normally they just do a blunt dissection don't they, like push a stick in the mud and make a hole basically. But they have got something to aim at in my case, it just doesn't need to go sort of anywhere. It is a bit involved because the uterus in its normal position is slightly above the bladder, and the bladder of course being to the side, well not the side really to the front. Whereas they avoid going anywhere near the bladder and the rectum when they make these artificial pseudo things, so I don't know how they would get around it they made an attempt to do so, but of course there are lots of funny things you see. They don't know how old I am genetically at this stage and they don't know whether I'm now in a state of puberty or whether I've past menopause you see. The problem is that if I start to menstruate they have got real troubles because there is nowhere for it to go. Initially, the body would initially have to absorb it, if I ovulate, if I ever do, but there is going to be a big hassle if that should happen, but so far there is no sign of that. Menstruation will force the issue there is nothing surer than that. Hopefully at nearly 70 years of age next birthday I should be past it by rights.

Life stories as fragments of biography

Luc Botanski (1987: 8) suggests that interviews are not naturalistic; they are always shaped by the conditions in which they were obtained and, I would argue, retold. Life history interviews may be read as 'staged sites' whereby individual trajectories and experiences are reordered, reformulated and reinterpreted. Interviews require a particular 'language game' (Botanski, 1987: 8) that is organised around disclosure, confession, self-reflection, privacy and secrecy. Robyn's story begins with a confession - that she is not transgendered. She then goes on to set the conditions under which she is prepared to disclose her story. During the course of the interview she reflects on his/her past and reinterprets that past in light of her new knowledges about his/her body. Robyn is a member of a minority group, his/her story is told to me one-on-one and in 'confidence'.¹⁶ The subject matter is extremely personal and a 'secret' between Robyn and a select group of people - some, but not all, members of her family, her doctors, and myself. At the same time life histories are public conversations that are retold through the often-complex process of turning private talk into words on a page.

¹⁶ Robyn's story is reproduced with Robyn's permission.

The life history interview makes some things explicit and others implicit. The language used, the way in which the story is told, what aspects of his/her life the speaker chooses to include, the interpretation of what is said are relatively transparent in the (re)presentation of a life history narrative. The attributes of the speaker, what she has said elsewhere, the aspects of their life the speaker has chosen to exclude, how the story is retold through editing, and revisions made to ensure anonymity also have an 'absent presence' (Shilling, 1993) in the life history narrative. Or to put it another way, the life history is a (re)construction of events that are organised to tell a story about the story that is narrated by the informant. In Robyn's story identifying features such as his/her name and occupation, the names of other actors, local place names, and the exact dates on which particular events described in the life history occurred have either been changed or omitted. Robyn also confesses that s/he has given different accounts of self to her parents, doctors, counsellor, to other transgendered people (and possibly to the researcher). Robyn's story is a combination of what is said in the presented transcript and also what is omitted; it is both a form of public disclosure and a private conversation that is not without consequences.

Tensions between public face and private life are reflected in Robyn's concerns about the need for me to protect her identity in the context of the transgender community in which she was a regular participant. Acceptance within her local transgender community was important to Robyn, as she valued the support and knowledges associated with transitioning across gender that were available to her within that community. Robyn shared with me enough of his/her life story to make her clearly identifiable to others regardless of the use of a pseudonym, therefore, she placed a tremendous amount of trust in me to protect her identity. The transcript begins with concerns about maintaining anonymity, which are repeated in the course of the interview but not reproduced in the transcript. In order to protect Robyn's identity changes have been made to the above interview extract. These changes do not significantly alter the narrative that is foregrounded in the transcript, which is Robyn's story about his/her body changing sex/gender. For reasons of anonymity, details about Robyn's life, outside of his/her story about the events that led to his/her medical diagnosis and treatment as a hermaphrodite, are also kept to a minimum. This means that some of Robyn's quirky and unique narratives about her experiences of

transitioning across gender have also been omitted, as I am sure she would have shared them in her support group as enthusiastically and as animatedly as she shared them with me in the interview.

With each editing of Robyn's story, he/she has necessarily become more and more one-dimensional. For example s/he is presented as an anonymous male/female, who has an undifferentiated work history, whose story takes place at a non-specific locale over an unspecified time period. I am deeply ambivalent about this process of rendering Robyn unrecognisable and I regret that the richness of Robyn's life, those aspects of experience that make us fully human, cannot be reflected in the final transcript. The process of writing Robyn's story demonstrates the way that research is never 'objective', but is always a series of negotiated compromises. In this way the processes associated with writing life histories are similarly organised around disclosure, confession, self-reflection, privacy and secrecy. At the beginning of this chapter, for example, I 'disclosed' aspects of Robyn's story as she narrated it to me, I have 'confessed' to changing, or omitting, parts of her story in order to ensure the anonymity of the informant, and in the following sections I 'reflect' on the process of doing the life history, of retelling and interpreting Robyn's story.

A problem of language

Ontological and epistemological issues of continuity and discontinuity underpin Robyn's life history narrative. On the one hand, Robyn's conscious reinterpretation of her past may be read as a response to the way conventional understandings about the relationship between sex and gender, as fixed and immutable, reflects and inscribes a reality that does not fit comfortably with Robyn's biography. On the other hand Robyn's attempts to weave continuity into a conventionally discontinuous narrative of identity (Davis, 1995: 98-99, 113) may be interpreted as an outcome of the process of narrating the life history itself.

Life histories are everyday conversations about how selves are crafted through personal experience. As such, they usually demand a particular narrative style; one that is consistent and linear (Benson, 2001: 50). For most of us our sexed identity, and as a consequence our gender, are taken for granted as part of a fixed and unchanging framework through which we experience the world. For Robyn such biological

certainties are no longer tenable. Robyn defines herself, and inhabits a social world, in which s/he constantly moves from one gender to another; physically, psychologically, linguistically, socially and symbolically. As a result, Robyn's narrative constructs an identity that is shifting and contingent. That is, different identities become salient depending on the context to which s/he is referring or in which s/he is physically present. For example, although Robyn claims a biological and social identity as a woman, he also retains a male identity as a son and father. Robyn simultaneously operates with biologically determinist understandings of gender – "I'm actually a biological woman... and always have been...", "this silly little ovary was doing its job for the first time in its life and that is why I was having these silly problems you see, being emotionally upset..." - and ideas about it as socially constructed – "I've just been learning the ropes basically and having to forget something like 62 years of being a bloke and learning some of the habits of women..."; "you have got to practice being a woman". Robyn's story is therefore a destabilising one in which words and images can give only an approximate view of Robyn's identity and experience.

The linguistic resources Robyn uses to tell her story are also a product of the social groups in which Robyn is, or has been, involved. Robyn describes her transgender identity as something that was forced upon her, and suggests that she masquerades as transgendered in order to access the support and specific knowledges available to people within that community. Robyn claims authenticity as a woman, which raises concerns about unauthenticity in the context of the transgender support group. She sees herself as in some ways more authentically female than others in this group. She considers that her involvement in the transgender community is involuntary. Ironically she has concerns about being exposed as a transgender fraud because, unlike the transsexuals with whom she is acquainted, Robyn is able to ground her identity as a woman in her anatomy. Robyn distances herself from other 'transys', saying that she is not like them, and in the context of the transgender community describes herself as a woman impersonating a male-to-female tranny. Robyn describes herself as about half way there, neither male nor female, s/he is ambivalent about her male biological identity and yet continues to retain aspects of her male biology and her male identities as both son and father. At the same time as Robyn claims to have always been a woman, she reworks her personal history as a boy, and later a man, in relation to her new knowledges about her body, and at the time of the interview preferred to claim a

biological and social identity as a woman. His/her identity as a hermaphrodite is not a significant discourse in the interview transcript, and is not presented explicitly as a potential identity in its own right.¹⁷ Although Robyn is in some ways reconciled to his/her own 'problematic' hermaphroditic body, preferring to postpone any decisions about surgery in the meantime, she also talks about the hermaphrodite as a 'problem' that is usually resolved at birth.

At the heart of Robyn's dilemma, surrounding his/her attempts to construct a coherent and continuous narrative of identity, is his/her use of conventionally incompatible discourses associated with boy and girl, man and woman. On the one hand, Robyn's story is about the boy who becomes the soldier, worker, father, husband, lover, and on the other, her story is about acknowledging the girl, and becoming a woman. Robyn's identities, as male and as female, are a product of these contradictions. S/he cannot abandon either. Each represents a fundamental aspect of his/her experiences and history, yet the construction of language around sets of binary oppositions ensures that neither can work comfortably together - his/her identity as a male and as a female are incompatible as they usually cancel each other out (Botanski, 1987: 10). At the same time stating that these discourses about being male and female are incompatible, because they cross the boundaries of what are conventionally considered to be disparate realms of practice, assumes that Robyn should attempt to resolve contradictions surrounding his/her identity by taking an either/or position in relation to his/her sex and gender. Robyn's history ensures that s/he will always be both regardless of his/her social gender.

Robyn's story may be read as a problem of language, and the way in which language reflects and inscribes a reality that does not fit comfortably with Robyn's biography. Moreover, Robyn's story demonstrates how it is possible to be both (or neither) sex(es), and how it is possible to alternate between two incompatible discourses at the same time. Robyn's story is not an exception to sets of understandings about sexual difference. Instead her story illustrates the constructedness of language, in this case

¹⁷ Cheryl Chase (1998) is a self-identified intersexed person who is critical of standard surgical correction of intersexuality in infants. She embraces the both/andness of intersexed bodies and argues for the rights of intersexed people to be able to choose their sex/gender in later life. Epstein (1990), Findlay (1995) and Wijngaard (1997) provide excellent critical histories on the cultural/medical construction of intersexuality. Dreger (1998) and Hird and Germon (2001) are also critical of the way intersexed bodies have been disciplined, and their identities erased, through medical intervention.

around sets of understandings about sex and gender, its basis in the social, its assumption of unambiguous oppositions, and its troubling of those dualisms by illustrating the ways in which oppositional ways of thinking are interdependent. Robyn's story is problematic precisely because s/he blurs the boundaries of sexual difference in ways that lay bare the processes through which inclusion in one category is dependent upon exclusion from its opposite.

Robyn's story is culturally embedded in sets of understandings about the relationship(s) between male and female, men and women, masculinity and femininity. Language and knowledge are constituted through binary oppositions which are 'a series of mutually dependent opposite pairs in which one side of the pair has a positive definition, whilst the other side is defined as everything that the other is not' (Roberts et.al. 1995: 526). Examples of these dualisms include: mind/body, nature/culture, male/female, masculine/feminine, and rational/irrational. Robyn's embodiment deconstructs the male/female binary opposition, since s/he is both the woman with a uterus and one functioning ovary and the male with testes and a penis. In other contexts Robyn refers to his/her-self as both the "mate" and the "chick", and a "bloke" and a "girl". The dualisms constituting nature and culture and their respective associations with female and male, irrational and rational are also disrupted in this story. When referring to herself as a female s/he describes herself as "moody" and "emotional"; when he talks about his male identity he is "practical" and the "technician".¹⁸ Robyn's story illustrates the ways in which these dualistic understandings about sexual difference may be applied to the bodies of individuals. The agents in Robyn's story operate with oppositional understandings about the relationship between male and female, men and women, masculinity and femininity. These understandings are reflected in, and in turn construct, public narratives of sexual difference, gender, masculinity and femininity.

¹⁸ Gill and Grint (1995: 8 and 10-11) argue that 'technical competence has come to constitute an integral part of masculine gender identity' such that a particular version of masculinity is central to definitions of technology.

Doing masculinity, being feminine

Two stories about gender emerge out of Robyn's narrative: a man's story centred around work and masculinity and a woman's story centred around issues of embodiment and the social practices associated with doing femininity. Robyn's story maps many identities, each of which is constructed in relation to sets of understandings about masculinity and femininity. At the same time these identities are deeply embodied stories about how corporeality mediates the interface between culture and subjectivity. Robyn's marginality allows her to reflect on the construction of her gender identity. Rather than being an exception to binary notions of gender, her observations point to the way that gender identities come to be codified, constructed and crafted in relation to public narratives of masculinity and femininity and the everyday practices of individuals.

Robyn describes her past as a man in relation to sets of understandings about 'hegemonic masculinity'. Bob Connell (1995: 77-78) defines hegemonic masculinity as an historically unstable and contested set of culturally accepted ideas, strategies and practices which are taken to legitimise existing patriarchal relations and thereby guarantee the dominant position of men and the subordination of women. Connell notes that hegemonic masculinity is defined through a series of exclusions that are based on gender, class, race and sexuality, which also tend to privilege particular groups of men vis-à-vis other groups of men. Key sites where sets of understandings about hegemonic masculinity are legitimated include the family, the military, the state, labour relations, heterosexuality and sport. Robyn talks about the way masculine identities are crafted through familial relationships, work, heterosexuality, drinking and sport, these identities being described in relation to sets of understandings about 'hegemonic masculinity'. When Robyn talks about how he has practised masculinity in his own life he refers to his participation in rugby at school and reflects proudly on his achievement at making the first XV. Robyn uses several discursive strategies to 'shore up' or normalise his identity as a heterosexual male including his place in the army in World War Two, drinking at the pub, career, marriage, fatherhood, disparaging

comments about “queers”, and response of “Oh it worked, I worked”¹⁹ to my suggestion that it was unusual for people in his situation to be fertile.

Robyn also reflects on the discourses and practices associated with doing masculinity from the vantagepoint of his current identity as a woman. Difficulties he experienced in gaining the acceptance of his male peers, both as a child and as a man, are reinterpreted in light of newfound knowledges about his body. An idealised masculinity is used implicitly as a yard stick against which Robyn compares his problematic physicality, the assumed heterosexuality associated with his disinterest in girls – “you don’t chase around after girls if you are one” – and lack of acceptance as “one of the boys”. The discourses about masculinity that come into play in Robyn’s story can be interpreted as a commentary on the construction of a particular kind of masculinity that is defined through the exclusion of ideas and practices typically associated with the feminine. In Robyn’s story masculinity is strongly associated with action, mateship, heterosexuality and work, while femininity is associated with emotionality, indecision and body image. Like all of us, Robyn is not inherently masculine or inherently feminine, but instead recognises himself, or herself, as masculine or as feminine in relation to sets of understandings about masculinity and femininity (Pringle, 1989: 89).

Robyn explains her decision to reconstruct her social gender in accordance with her female biology. These new knowledges about her body mean that it is problematic for her to maintain a masculine narrative of identity which is uncontaminated by qualities normally associated with the feminine. Instead Robyn attempts to craft a new story about herself by drawing together disparate sets of social conventions surrounding sex and gender, a process which is dependent on medical technologies, language and doing femininity. Hegemonic discourses and practices associated with masculinity, femininity, medicine, and biology become resources for Robyn to rework his old male identity and construct a new female identity. When Robyn identifies as a woman a different set of assumptions and expectations come into play, ones that are typically associated with public narratives of femininity (McRobbie, 1991, 1994; Jamieson, 1997, 109).

¹⁹ I take ‘oh it worked, I worked’ in this context to refer not only to Robyn’s ability to father children but also as an indication that his penis was of sufficient size so that he was able to have penetrative sexual

Robyn talks about the way feminine identities are crafted through body image, fashion, beauty and heterosociality. These identities are described in relation to stereotypical understandings about femininity. The woman is a relatively recent identity in relation to Robyn's life trajectory. She does femininity through dress, make-up, hairstyle, motility, speech patterns, interacting with others (and baking a cake during the interview for a 'ladies a plate'²⁰ function the following day). In another part of the interview she talked about having voice lessons, resisting the urge to lead at dances, learning to construct a fashionable image and to put on makeup. Robyn operates with stereotypical understandings of women and femininity but at the same time resists the expectation that she should adhere to such expectations all the time. Robyn is constantly catching herself in the act of constructing her identity. She does femininity, but it does not come easily, she has to constantly 'work' at it, and she admits that she makes mistakes.

Robyn's new female identity is precarious because, in certain contexts, her old male identity has the potential to disrupt or undermine her carefully crafted femininity. For example, Robyn talks about inconsistencies in the way people refer to her 'sex' in everyday interaction. In the above transcript she describes an incident at the bus terminal where, in reply to her request for information about a bus number, the kiosk attendant referred to her as 'madam', while minutes later at the bus the driver referred to her as "mate" - which is understood by Robyn as a highly gendered term that is used only by men to refer to other men. It is interesting to note that when describing the above incident at the bus terminal Robyn talks about how being called "madam" is a reference to her 'sex' rather than her gender. This suggests that Robyn still employs generalised understandings about the commensurability of sex and gender even though s/he has had experiences which indicate otherwise - both personally and through exposure to others in his/her transgender support group. Robyn's female identity also has the potential to disrupt his male identity as son to his parents. Robyn, for example, talks about having to come up with 'suspiciously evasive' answers to his mother's questions about the length of his hair and nails.

intercourse (with a woman).

²⁰ 'Ladies a plate' is a quaint colloquial term that is commonly used in New Zealand and Australia to indicate that women attending a function should bring along some finger food for the supper/afternoon tea.

Biological sex, gender and sexuality are analytically separate but in social practices they are often linked. Robyn defines herself by bringing into play a range of narratives about gender, medical knowledge, biology, and personal biography. Her story both confirms and disrupts sets of understandings about sexual difference. Instead of questioning the social structures that make Robyn's body 'problematic', Robyn tells a story about the ways in which she attempts to bring her body into line with binary notions of biological sex and social gender. Medical discourses and practices also blur the categories and boundaries associated with sex and gender. These understandings about sexed bodies need to be set in the context of feminist debates surrounding medical power/knowledge. By looking at the dominant themes and images of medicine in popular culture, feminist literature and medical literature two stories about medical knowledges and practices emerge: one which emphasises partnership and co-operation and another which emphasises power and control.

Medicine and public narratives of sex and gender

There are two public narratives typically associated with the medical profession, one of a progressive, caring profession in which medical technologies are presented as a solution to a wide range of individual pathologies, the other of an oppressive patriarchal profession in which medical technologies are used as a mode of discipline and as a means of control (Fausto-Sterling, 1993: 24; Albury, 1999: 169-170). The latter story usually focuses on women's contradictory relationship to medicine. It emphasises the physical dangers associated with 'unnecessary' medical interventions and explores the unique political risks that medical objectification and control pose to women. According to this perspective the medicalisation of women's bodies individualises, and therefore depoliticises, health problems deflecting attention away from the way that 'objective' medical definitions of pathology are also embedded in social relations and processes (Sawicki, 1991). In this latter story medicine is not considered to be a solution to a range of 'health' issues that are typically associated with women [for example, body image (Bordo, 1993a, 1993c; Wolf, 1991; Hesse-Biber, 1991), infertility (Raymond, 1994; Wacjman, 1991; Klein, 1989; Martin, 1987; Corea, 1985), menopause (Lupton, 1996; Coney, 1991), disability (Munford, 1995; Wendell, 1992)] but is instead presented as part of the problem, in that medical

discourses and practices uncritically take up assumptions about beauty, disability and gender.

Bringing feminist criticisms of medical practices like infertility treatment, cosmetic surgery or sex reassignment surgery into popular discourse has important political implications for individuals who may choose to engage in these technologies. This is because it allows for the possibility that the social meanings and power relations within which the practices of the medical professionals are inscribed may be challenged, and alternative resistant or critical discourses and practices produced (Sawicki, 1991; Davis, 1991; Albury, 1999: 169-171). These negative understandings about medical technologies have also been criticised for being overly pessimistic and moralistic. Analyses of patriarchal power, as operating through violence, objectification and repression, are unable to explain why many women view medical technologies as beneficial and enabling or why women voluntarily engage in them (Sawicki, 1991; Davis, 1991). Rhetorics of medical violence, danger and control also tend to construct women as passive casualties of larger external processes - the workings of free market capitalism or the heterosexual dictum that women should make themselves attractive to men for example - and to position women who use medical technologies as cultural dupes rather than active negotiators with the medical profession over their health care (Davis, 1991, 1997; Cussins, 1998). An alternative explanation of women's relationship to medical technologies is one which considers complexity by acknowledging the potential pleasures and benefits of medical interventions for individual women while also exploring the contradictions, ambiguities and risks involved in women's health care decisions (Davis, 1991, 1993, 1995; Sawicki, 1991; Phibbs, 1994).

The issues raised in the above discussion of public narratives associated with the medical profession are relevant to an analysis of Robyn's story about her relationship with the medical professionals associated with her case. Robyn presents herself as a passive product of processes that are largely beyond her control - an accident in her backyard, her biology, medical diagnosis, and her body's response to treatment with male hormones - all of which she struggles to make sense of in relation to her present situation. At the same time, she uses the medical profession strategically to legitimate her female gender identity, to enhance her biological status as a woman through the

use of hormones, and she considers the possibility of sex reassignment surgery. Robyn's story is also a story about how she negotiated with the medical profession to maintain her sexed identity initially as male and subsequently as female.

Robyn's story speaks to the construction of essentialism within feminist, medical and common sense understandings of sex, gender and sexuality. Essentialism is indicated by common sense assumptions of unproblematic continuity between biology, anatomy and social gender. These assumptions are also evident within academic feminism (Grosz, 1994: 207, Hausman, 1995)²¹ and medicine. The medical professionals associated with Robyn's case attempt to resolve Robyn's problematic body by offering surgical solutions that realign biology, anatomy and social gender. Binary oppositions constituting essentialism and social constructionism, body and performance, doing gender and being gendered are disrupted in Robyn's story. This is because Robyn's account of gender also rests on the notion of an embodied choosing subject. Robyn is ambivalent about being a woman - in an interesting turn of phrase that indicates a mind/body split, she says "sometimes I'm very happy to be female and on other days I hate the idea". Robyn accepts the biological reality of it, but sometimes hates the idea or representation of that reality perhaps because of the "work" involved in doing femininity, and attributes this indecision to "moody women" - i.e. biology.

Distinctions between essentialist and social constructionist approaches to the body are not clear cut. Arthur Frank (1996) argues that people adopting social constructionist approaches must consider the interaction between the body as flesh, self or subjectivity which he terms the body-subject, and the ways in which bodies, specifically those subject to a medical gaze, are inscribed with social meanings. For Frank, it is only through bodily-located knowledges, or the interaction between flesh, inscription and intention that embodiment becomes 'experience' (Frank, 1996: 58).

²¹ Elizabeth Grosz's critique of transsexualism, for example, draws on essentialist notions of male/female bodies, behaviours, identities and experiences:

'...Men, contrary to the fantasy of the transsexual, can never, even with surgical intervention, feel or experience what it is like to be or live as women. At best the transsexual can live out his fantasy of femininity - a fantasy that in itself is usually disappointed with the rather crude transformations effected by surgical and chemical intervention. The transsexual may look like a woman but can never feel like or be a woman...' (Grosz, 1994: 207).

For Grosz, female gender identities are made through the experience of occupying the social position of woman for a lifetime. Transsexual bodies are problematic because they disrupt lines of connection between biology, identity and experience. She emphasises social identity based on experience and

Frank's argument, developed in the context of his personal experience of illness, may be appropriated to an analysis of Robyn's story without doing too much violence to the original meaning of Frank's text.

Robyn recognises him/herself as male/masculine or as female/feminine, and constructs his/her identity as male or as female, in relation to sets of understandings about maleness/masculinity or femaleness/femininity. Robyn's subjectivity is crafted in the context of occupying a body that confounds conventional discourses associated with gender and sexual difference. This lack of fit between embodiment, subjectivity and 'ordinary' discourses about sexual difference/gender as fixed and immutable suggests that identities are not simply a product of discourses and social practices. Robyn's story illustrates some of the ways in which gender identities are socially constructed, but it is also a deeply embodied story about the relationship between subjectivity and corporeality. Robyn's story challenges assumptions that the relationship between social gender and the anatomical body is immutable. At the same time Robyn's use of hormones, and attention to the possibilities associated with gender reassignment surgery, reinforces the notion that anatomy and social gender have to be consistent. Yet they will never be totally consistent because Robyn's identity also reflects her social history as male. She will always be a son and a father for example.

It would be impossible for Robyn to tell his/her story without having had the experience of occupying his/her body. Robyn's identity is a product of the interaction between embodiment, experience, subjectivity, intention, and sets of understandings about gender and sexual difference. Robyn's decision to change his/her social gender is a response to the acquisition of new knowledges about his/her body. These knowledges are both 'felt' in his/her experience of bodily changes and confirmed through medical diagnosis and suggestions about treatment. Following diagnosis, Robyn's subjectivity initially as male, and subsequently as female, is actively negotiated through a range of medical options presented to Robyn as a solution to his/her 'problematic' physicality. To use Frank's terminology explicitly, Robyn's subjectivity is in part a product of his/her bodily-located knowledges. It is through the interaction between flesh, inscription and intention that Robyn's embodiment becomes experience.

suggests a distaste for genital transformation. See Chapter Seven for a discussion of the use of essentialism in Hausman's (1995) analysis of transsexualism.

Moreover, Robyn's story illustrates the ways that subjectivity is not only crafted through actively taking up, and being taken up by, particular discourses and practices, but it also points to the way that *bodies impact on the discursive positioning of subjects*.

I want to make it clear that in suggesting that stories are embodied I do not want to adopt an either/or position in relation to bodies and narratives, or to assert the primacy of one vis-à-vis the other, but to explore the ways in which stories and bodies are interconnected. Narratives and bodies do not exist in opposition but are instead interdependent. Robyn's story is a specific example of the way that personal narratives may be used to complicate and disrupt assumptions about the discursive construction of embodiment and its relationship to subjectivity. I am not suggesting that embodied stories are more authentic than others, for example medical narratives about gender and sexual difference, but instead argue that attention to bodily experience in the strategic stories of actors enables sociologists to offer more complex analyses of the ways in which individuals make sense of, and craft, their identities. Robyn, however, was not the only person who was born a hermaphrodite that I encountered during this research.

Nick, an FTM interviewed for this project, also states that his decision to change his social gender was in response to the physical changes that occurred *in* his body when he was a teenager:

They (the doctors) put me on female hormones to try and bring on my period. That is why when I was in the (children's) home and they took me off them my mother went off her brain, went to the government and everything. They thought I was on the pill for sex, they did not realise I was on them for a hormone imbalance. In addition, if I have to blame someone for my decision, (to change social gender) which I don't, but if I had to blame someone I'd blame the government agency. Because initially what they have done is taken that choice away from me. I didn't have a choice when I was little. Look I didn't get ripped off once, I got ripped off twice. Once when I was born, my mother she had this decision to make years ago and she made it and reality shows that she made a mistake, but that is in hindsight. I accept that I'm not bitter about that at all, because that is the way it was. When I was thirteen they took me off female hormones. I was 18 when I found out that I was a hermaphrodite my Nana told me. (She said) "Now that you are 18 I think you should know because your mother would not tell you about it." Makes you want to go to the pub ayeh! She told me I was born with an extra bit. It was like I had this, what I first thought of was this big jigsaw and I had this one piece that would just not fit, when my Nan told me it was like it (the jigsaw) was finished, it fits, it makes sense. So, I

wasn't one of those people who realised that they were transgender at four or five, it never occurred to me. I changed gender purely because it was a logical change. I grew facial hair, my voice broke, and I changed gender. I believe that is a rare thing.

Nick, FTM, 1996

Nick's account of how his body forced gender identity issues for him is remarkably similar to Robyn's story. My interpretation of Nick's story is that he was born intersexed and had 'corrective' genital surgery as an infant that made his genitals conform to those of a girl. He was raised as a girl and entered a children's home in his early teenage years when his mother became too ill to look after him. Nick had been taking female hormones to correct a hormonal imbalance and this medication was stopped when he entered the children's home. During puberty Nick's body masculinised. When he turned 18 his grandmother told him that he had been born intersexed. Nick took on a male identity from that point onwards. He sees this decision as responding to the physiological changes that he was experiencing.

Nick identifies primarily as a male; in the interview with me he also claimed an identity as a tranny in relation to his political activism, and as a hermaphrodite when describing his personal history. He distances himself from stereotypical public narratives associated with transsexualism by stating that he did not always identify as a male. Nick's childhood self is that of a 'girl' – in another part of the interview transcript (that is not reproduced here) he argues that he was never a woman because he did not menstruate. Nick is able to ground his identity as a girl in his childhood experiences and his female genitals. His identity as a man is crafted in relation to his masculine physical appearance and his more recent history of living as a (heterosexual) male. Nick's biography is both/and; it traverses conventionally incompatible identities initially as female and later as male. Nick, like Robyn, is able to ground both of these identities in her/his biology.

Diana Fuss argues that both essentialism and social constructionism are historically, socially and politically specific categories, which position and constitute 'things' like the gendered subject. They do not exist in opposition, but constitute and re-constitute each other (Fuss, 1989: 3-4). Fuss argues that 'there is no essence to essentialism', and that social constructionism 'really operates as a sophisticated form of essentialism'

(Fuss, 1989: xii). For example, some constructionist use of the plural to emphasise heterogeneity and to disrupt unitary understandings about men and women may be underpinned by a form of nominal essentialism that is based in the linguistic designation associated with the collective categories (of man and woman) (Fuss, 1989: 3-4).²² Essentialism contains traces of social constructionism and vice versa; essentialism is both fixed and fragmentary. Fuss, an 'anti-essentialist' (1989: xiv), cautions against dismissing essentialist rhetoric as 'bad' or unsophisticated, and suggests instead that it may be more useful to explore the ways in which essentialism is deployed within discourse, and to interrogate its origins, purposes and textual effects (Fuss, 1989: xi).

In order to make sense of her ambiguous physicality Robyn draws on both biological and social essentialisms. She explains that, although she never felt like 'one of the boys', he could compete successfully with other men, in sport, in the army, and also through the acquisition of technical knowledge and in gaining promotion at work. In Robyn's narrative masculinity is associated with a form of social essentialism that is based on (social) position - the rugby half back, the army corporal, the senior technical officer are her masculine identities - accomplished through competition with others. Moreover, biological essentialism underpins this narrative in the sense that an unproblematic male biology is accepted as the standard against which male competence is measured. Femaleness is also embodied, but rather than being taken for granted it is acknowledged in Robyn's experiences of physical and emotional change. Similarly, Robyn's decision to change her social gender, and therefore the embodied practices associated with doing femininity 'work', are grounded in her biology. The different forms of essentialism that underpin Robyn's narratives about maleness, femaleness, masculinity and femininity suggest that for Robyn essence is more fluid

²² Fuss (1989) suggests, for example, that constructionism is dependent upon the essentialist/constructionist opposition to do its work. This oppositional relationship is evident in essentialist/constructionist debates surrounding 'the natural' and 'the body'. According to Fuss 'the essentialist holds that the natural is *repressed* by the social, the constructionist maintains that the natural is *produced* by the social' (Fuss, 1989: 3 italics in the original). 'For the essentialist the body occupies a pure, pre-social, pre-discursive space' (Fuss, 1989: 5). For the constructionist the body is produced through socially and politically situated systems of representation. Further, to say that the body or the natural are socially produced is not to preclude essentialism entirely because there are forms of social essentialism. Fuss suggests that it might be necessary to look at how essence can change and how constructionism may be normative (Fuss, 1989: 5-6) Robyn's story provides an opportunity to explore these ambivalences.

than perhaps some feminist theorists have generally allowed.²³ In Robyn's narrative essence is both fluid and fixed, continuous and discontinuous, embodied and constituted through language. Essence is continuous in the sense that Robyn's identities as male and as female are based on sets of general understandings about biology and the social/psychological practices associated with gendered subject positions. At the same time, Robyn's experience of essence is discontinuous in the sense that s/he is able to constitute and re-constitute his/her identity as male and as female.

Some feminist criticisms of male-to-female transsexuals as 'artificial' women tend to be based on an implied assumption that genetic women are 'natural' and that female biology is unproblematic (Raymond, 1980; Grosz, 1994; Hausman, 1995). Bernice Hausman (1995: 139-140) for example, suggests that female subjectivities crafted through the use of medical technologies, such as hormones or surgery, are less legitimate than other forms of subjectivity crafted by women without the use of these technologies. In this sense Hausman's argument is underpinned by a form of biological essentialism that locates identity in the 'natural' (i.e. pre-medically-enhanced) physiological body. This argument problematically suggests that socially constructed subjectivities are more natural than technologically constructed subjectivities (Garber, 1993: 334). Robyn is able to ground her female identity in her biology. However, Robyn's decision to change her social gender late in life, her use of medical technologies to maintain her gender identity, her involvement in the transgender community in order to access the support and knowledges about transitioning across gender from people who identify as transsexual, and the secrecy surrounding her intersexuality, places her experiences at odds with some feminist writers who argue that female gender identities are made through the experience of occupying the social position of woman for a lifetime (Grosz, 1994: 207; Lienert, 1995).

Robyn's and Nick's stories pointedly illustrate the way in which biology does not exist outside of culture but is instead a social discourse that is open, shifting and contingent (Haraway, 1991: 134). Robyn provides an account of her relationship with the medical professionals associated with her case. The narrative builds to the dramatic moment in which she describes her visit to the local hospital and recounts the

²³ See Grosz, (1994) and Vance (1992) for examples of feminist discussions of essentialism that tend to emphasise 'fixity' over strategic use.

conversation that reveals the results of her tests, and therefore, her diagnosis as a woman. She describes the preferred option presented to her during that conversation with her doctors; one in which all vestiges of her female biology are surgically removed. Robyn asks if there is an alternative, and the doctors confirm that they could use male hormones to keep him the way he is.

The narrative that is not emphasised in Robyn's story about his conversation with the doctors is his diagnosis as a hermaphrodite. Instead Robyn tells a story about how the doctors informed him that he was a "girl". It is impossible to know if Robyn would tell a different story about that conversation if he had been able/chosen to remain a man. However, if we accept Robyn's version of events some interesting contradictions emerge. The first is the use of biology to interpret social gender, and the second is the use of social gender to interpret biology. In each case neither strategy is clear cut; both work together in complex and interrelated ways. Concerning the use of biology to interpret social gender, at the point of diagnosis, despite his external male genitalia, social gender and familial relationships as son and father, the medical professionals told Robyn that he was a 'girl'. One reading of this narrative is that as the accident had left Robyn unable to function sexually as a man, and as the hormonal balance in his body shifted towards that of a woman, Robyn no-longer unambiguously occupied his own and the doctor's medical definition of male. If Robyn was not male then only one acceptable possibility remained: that Robyn was female. Hence the doctors presented to Robyn the idea, and therefore the possibility, that he was, or could become, 'a girl'. Moreover, this assumption is based on a form of essentialism that locates the potential for Robyn to assume a female gender identity in her physiology. In this interpretation of Robyn's story gender relations are restored to the stark simplicity of biology. Robyn's narrative is illustrative of way in which biological essentialisms are socially constructed. Her account speaks to the particular understandings about the relationship between biology, sexual orientation and social gender of the actors involved in the story. At the point of diagnosis, both Robyn and the doctors explain Robyn's latent female identity in terms of her female physiology. His male identity is located in the assumed heterosexuality associated with his interest in girls, his male genitals and history of living as a male.

Another twist on the theme of essentialism in Robyn's narrative is the use of social gender to interpret biology. Faced with the uncertainty associated with Robyn's ambiguous biology the doctors initially revert to a form of social essentialism that attempts to define Robyn's biological identity in terms of his sexual orientation and his social gender. Specifically, Robyn's female biology is downplayed in favour of his personal history of living as a male and the psychiatrist's confirmation of Robyn's heterosexuality by his 'interest in girls'. Instead of surgery to remove his female anatomy, Robyn is prescribed hormones to ensure that he stays male. Robyn's body however, resists medical attempts to discipline and control his problematic female biology. Health problems associated with using male hormones to maintain his male body, and therefore male gender identity, means that in order to continue along this path Robyn will eventually be forced to have major surgery. His body stubbornly continues to feminise in such a way that over time Robyn comes to redefine his social gender in terms of his female biology. Robyn's ambiguous body becomes the catalyst for his eventual decision to move from one gender into the other - a strategy that has recourse to biological essentialism. Again medical professionals defer to her chosen social gender in order to interpret her ambiguous biology. Robyn is presented with a second option, one in which she sheds all of the vestiges of her masculinity and her male biology - which is in some ways a symbolic gesture given her personal history of living as a man. For the second time Robyn refuses the medical professionals offer to rectify her problematic biology surgically.

The discourses and practices of the medical professionals associated with Robyn's case aim at producing a standardised body; one in which biological ambiguity is removed. Medicine provides the institutional support for the formation and attachment of certain sexed identities to particular bodies. Robyn's story suggests that these identities are based on (hetero)normative ideals about the relationship between sex, gender and sexual orientation (Epstein, 1990; Fausto-Sterling, 1993; Hausman, 1995; Chase, 1998; Dreger, 1998). The clinicians associated with Robyn's case operate within a framework of "scientific progress", decisive clinical action and professional autonomy. Genetics and medical imaging technologies allow the medical professionals to read Robyn's body differently to the usual external signifiers of

biological sex.²⁴ In attempting to ascertain Robyn's sexed identity, the doctors attend not only to Robyn's genital morphology, hormonal, chromosomal and gonadal markers of sex, but also to his/her biography, sexual orientation and social gender. As Robyn's biological markers of sex fragmented, gender identity as a social/psychological concept replaced his/her physiology as the basis for interpreting Robyn's ambiguous biology. Instead of defining and specifying the relationship between sex and gender, Robyn's story illustrates the ways in which medical discourses and practices blur the categories and boundaries of physiological gender determination (Garber, 1992: 106).

As there is no undisputed medical definition of male or female (Hausman, 1992; Garber, 1992) Robyn's story illustrates how medical professionals associated with his/her case conceptualise the relationship between biology, sexual orientation and social gender. Moreover, the medical professionals' responses to Robyn's 'marginal' status provides a unique insight into the sets of understandings about sex and gender within medicine that may be applied by medical professionals to all of us. Robyn's biology does not fit with the medical professionals' understandings about binary notions of sex and gender. Distinctions between sex and gender are based on assumptions that the boundaries constituting male and female, masculinity and femininity, are fixed and unambiguous. Binary notions of sex and gender obscure rather than clarify the way in which these discourses and practices are applied to the body. In Robyn's story the boundaries between biology and social gender are blurred. His/her story suggests that in cases where biological sex is unclear medical definitions of sex and gender are discursively constructed rather than grounded in any obvious and unambiguous differences between the sexes.

The medical discourses and practices surrounding transsexualism draw on contradictory understandings of gender as both based in corporeality (endocrinology and physiology) and in the way identities are learned through socialisation and signalled through gender-marked behaviours and appearances. The reinterpretation and resignification of gender within medicine and psychology is complemented by philosophical theories about the historical discontinuity of gender categories (see Riley, 1988; Butler, 1993). Discontinuities within medical definitions of sexual difference suggest that gender identities are historically unstable and contested through discursive

²⁴ See Cameron (1996) for a discussion about the 'sex-testing' of female Olympic athletes. Cameron outlines the way that this test privileges genetics over anatomy and social gender.

formations such as those associated with medicine, legal and state regulations based on common understandings about sexual difference, and public narratives associated with masculinity and femininity.

The naturalistic view of biological sex neglects the fact that sex and gender are socially situated categories that may be understood only in relation to other social facts. Biology is not external to society; it continues to be one of the major strategies of social differentiation which a naturalistic view of anatomical sex invariably obscures. A study of transgender embodiment provides a unique vantage point from which to examine why gender categories have proved so enduring and so persuasive. Robyn's life history is one person's story, but it is also a story about the medicalisation of sex and gender and it is also a story about the social/institutional expectations associated with particular gender identities.

Resisting conclusions

Robyn's story is interesting because it brings together many of the questions that any sociologist doing an analysis of sex and gender would want to explore. Her story speaks to the relationship between biological essentialism, social essentialism and medical power/knowledge. It is a story in which gender fluidity, multiple identities, contradiction, ambiguity and uncertainty are central themes. It contains talk about how personhood is defined in relation to sex and gender, it explores the difficulties associated with keeping a particular narrative of identity going, and it looks at how individuals who have 'transgendered' bodies craft themselves in the practices of everyday life. It is perhaps ironic that this story, which clearly illustrates the ways in which gender, sexual difference and sexuality are socially constructed is so deeply embodied. Robyn's experiences point to the way that the body impacts on the discursive positioning of subjects. Her ambiguous anatomy and the (re)inscription of Robyn's body as female through medical diagnosis all interact to position and reposition Robyn in the 'field' (Bourdieu and Wacquant, 1992: 94, 101) in which gender relations are constituted. Her embodied experiences bring to light the limits of that 'field', the gaps or asymmetries between the meanings about sexual difference that are active in the field, its underlying (linguistic) structures and its rules and conditions for acceptance.

Robyn's narrative also demonstrates the way that life histories require a 'language game' that is organised around the use of past and present and 'then' and 'now'. Conventional understandings about life histories suggest that they are cumulative or progressive explanations about how we arrive at certain points in our lives set in the context of reflections on how those moments are determined by earlier life events. Life histories then, explore how the past influences the present by using the present to reflect on the past. The use of the 'now' to reflect on the 'then' is often taken for granted in the (re)presentation of a life history narrative. In Robyn's case this process is an overt part of the narrative itself. A good example of this play on 'then' and 'now' was provided in Robyn's use of his/her new knowledges about his/her body to consciously reinterpret her masculine past and to construct a new feminine identity for herself. At a particular point in her life, Robyn gained certain knowledges that enabled her to look at her past experiences, and her/self, in a new light. Robyn's life history also told a story about how the present enabled her to craft new stories about his/her past.

For sociologists, Robyn's story raises a more fundamental question than that concerning the relationship between sexual difference and gender, namely how do we as sociologists write about, interpret and understand the groups of people we choose to study? While my research is about people who identify as transgendered or as transsexual, the very act of naming my research topic also makes it problematic. As with any research involving groups of people who are identified by, and may in turn identify with, a unitary category it seems that the very process of doing research ensures that the collective group disappears into a variety of disparate individuals whose very diversity problematises the category under investigation; it is in short a problem of definition. Recognition of this disjuncture between the characteristics of individuals and the groups with which they identify is not new - it was noted in Botanski's (1987: 27-29) study of 'cadres' who are middle class French engineers. Feminists have also argued convincingly that the category "woman" is so diverse as to be unrepresentable (Butler, 1990: 1-6 and 142-143; also see: Riley 1988; Scott 1992; Barrett 1992, for example).

Robyn's story illustrates the many contradictions associated with the use of identity categories. In her story the identity categories typically associated with gender, and with transsexualism, are simultaneously fixed and fluid, strategic and given, forced and chosen. Robyn describes herself as a biological female, she claims a social identity as a woman, and yet she has a personal history of understanding herself as a biological male and of constructing her identity as a man. She suggests that her current situation is unintentional, even forced. However, she says that she *chose* to alter her social gender to that of a woman - but she retains her male social identities as son and father. Robyn's biology and her personal history problematises the very categories with which she identifies. At the same time, Robyn crafts her identities in relation to these categories as if the categories themselves are fixed and unambiguous. Robyn's life history illustrates the ways in which identity categories are not homogeneous and unvarying, but instead are diverse and unstable in ways that make them singularly unrepresentable. This is indicated in the difficulty of finding the 'right' pronoun to represent Robyn. In other words, Robyn's identities, as male or as female or as transsexual, appear to be determined neither by biology, nor by the social practices associated with gender, but by the existence of the categories with which she identifies.

At the same time individuals like Robyn or Nick craft their identities as men, as women, or as transsexual in ways that take the existence of these groups for granted. The information provided by informants often problematised the social groups with which they identified.²⁵ Robyn's experiences challenge fundamental modernist assumptions that the binary oppositions constituting male/female, masculine/feminine, nature/culture are naturally determined. At the same time Robyn's use of hormones, and attention to the possibilities associated with sex reassignment surgery, reinforce the notion that challenges to conventional masculinity and femininity have to be associated with changing the physiological make-up of the body. Robyn challenges categorisation, but maintains the association of bodies with behaviours and thus notions of the relation between physiological and social categories. Rather than being an exception to binary notions of gender, Robyn's story clearly illustrates how gender identities come to codified, constructed and crafted in the everyday practices of individuals.

²⁵ These issues are taken up again in Chapter Nine where I explore connections and differences in the inner city Sydney transgender community.

The next chapter also explores the doing and undoing of (trans)gender identities through the story of transgender performance artist and well known political activist Norrie May Welby. Welby's narrative about performing gender and crafting identities provides an opportunity to explore post-structuralist theories about subjectivity in general and Pierre Bourdieu's arguments about *habitus* (1990) and field (1992) and Judith Butler's (1990, 1993) views about performativity in particular. Welby's story is in stark contrast to the very private story told by Robyn.

All the world's a stage: Performing transgender subjectivities

Norrie May Welby's story

Stand by your gender¹
(Sung to the tune of 'Stand by Your Man')

Sometimes it is hard to be a woman
Proving to the world you are not a man
For it is a sad sin
If you don't fit in
Though you'll do everything you can
(like cut and paste birth certificates)

Sometimes it's hard to be a woman
Sometimes it's hard to be a man
Sometimes it is not fun
Deciding which one you are
Or which you want to ram

Stand by your gender
And show the world you conform
Don't tell the world that it's wrong
Or you'll be cold and lonely
Stand by your gender
Make sure you got the right one
Live life according to God's plan
Stand by your gender

Stand by your gender
Make sure you've only got one
Keep being half of all you can
Baby, (or mate as the case may be)
Stand by your gender

Extract from the performance piece "What Makes a Man?"

¹ Reproduced with permission from Norrie May Welby. The lyrics are the property of Norrie May Welby and may not be reproduced or performed without his/her permission.

Introduction

The previous chapter explored how Robyn attempted to craft a female/feminine identity while occupying a body that confounds conventional discourses associated with gender and sexual difference. In this chapter I consider the ways in which performance artist and transgender political activist, Norrie May Welby, uses drama and song to trouble binary gender categories and the social codes by which they are legitimated. While Welby acknowledges that gender is performance, the body is a central feature of both his/her talk about the performance and the actual performance itself. The success of Welby's performance is dependent upon his/her having a particular type of body - one that contains traces of both male and female, masculinity and femininity.² Welby uses performance to speak about the body and to suggest ways of being in the world that use both social constructionist and essentialist approaches to the body. Norrie May's post-structuralist account of gender, as multiple, fluid, shifting, contingent and contradictory, also rests on a notion of an embodied choosing subject. I argue that it is through the talk of people for whom contemporary understandings of sex and gender are 'problematic' that we are able to access the tacit social agreements that are embodied in individual everyday performances of gender. The chapter draws on observation of his/her performance and Welby's discussion of this performance and how s/he manages an ambiguous gender identity in his/her daily life.

Analysis of Welby's performance and the talk about sex and gender draws on the sociological concepts of '*habitus*' (Bourdieu, 1990) and field (Bourdieu and Wacquant, 1992) and Butler's (1990, 1993, 1997) arguments about performativity. I understand Bourdieu's notion of *habitus* as institutionalised, routinised practices; the processes by which norms are authorised, incorporated and reproduced in the everyday social actions of bodies. Bourdieu's 'fields' are constituted through shifting and contingent relational networks of power (Calhoun, 1993: 64; Pringle, 1998: 22). Social fields include the actors and institutions that occupy the different social positions - and engage in struggles over control of and access to the political, economic, cultural, social and symbolic resources³ - that are available within a given field (Jenkins, 1992: 84-85;

² Aalten (1997: 52) also observes that 'masculinity and femininity can be seen as enacted through the bodies of male and female dancers'. Moreover, female ballet dancers are selected on the basis of their physical size and deportment - in other words, a professional ballerina also has to have a particular type of body.

³ For Bourdieu economic capital refers to money, cultural capital refers to qualifications, social capital refers to networks and social connections and symbolic capital refers to 'the form the different types of

Bourdieu and Wacquant, 1992; Pringle, 1998: 22; McNay, 1999: 100). Bourdieu's attention to ordinary bodily practices is in contrast to Butler's focus on the subversive or disruptive potential of the performative. For Butler a focus on the normative conventions of action, exemplified in Bourdieu's concept of the *habitus*, fails to account for performances that confound the norms by which social conventions are authorised, institutionalised and regulated. Butler suggests that unauthorised performances, or speech acts, involve a break from prior usage associated with routinised practices or ordinary locutions. Norrie May Welby's talk about transgender performance provides an opportunity to examine the transformative potential of unauthorised gender performances/speech acts. I suggest that such performances do not involve a radical break with prior conventions; rather they engage with those conventions in order to expose prevailing forms of authority and the exclusions by which they are legitimated. In this regard, transgender performance simultaneously embodies traces of the unruly associated with incoherent gender identities and the normative associated with conventional gender identities. In this respect it traverses the agendas addressed by both Bourdieu and Butler.

Gender as performance

NMW: In performing gender I don't want to give them answers, I just want to make them ask questions... or to see that there are questions there. Like I can do a number "What Makes a Man?" I begin as a drag queen and then strip down and take off the drag, take off the knickers. Underneath the knickers I've got this strap-on, take off the strap-on⁴, put on men's trousers. Take the stuffing out of the bra, take off the bra, suddenly I've got breasts, quickly put a male shirt on and change my body. I've actually done that number totally naked all the way through and done it just with body posture, changing my gender back and forth. The way I hold my body, and in that song the way I do my voice, and so I demonstrate that gender is performance, which can be done naked. I can convince people I'm a man with a naked body, I can convince them I'm a woman with a naked body. It is performance, cultural clues that they pick up, and when I demonstrate it by switching back and forth, they have to question, even if they go: "This person is naked and I don't know what sex they are", it is an important question.

SP: You are very much playing around with gender fluidity and questioning people's assumptions about gender and its association with the anatomical body. So those techniques, both in terms of the way you use your body and in the words to the song, it actually forces people to address those issues.

NMW: I always aim to do it with humour, because when people are laughing they are not on guard, so for a moment their policing of self, their policing of their beliefs is relaxed and you have got a good chance of getting through to them. I think it is very important for any fundamental education, when someone challenges something that someone's fundamental beliefs is, to be entertaining. Because if they are sitting there with a prune face and the people around them are laughing their heads off, they will get that they are the ones with the problem.

capital take once they are perceived and recognised as legitimate' (Bourdieu, 1987: 3-4 cited in Calhoun, 1993: 70).

⁴ 'Strap-on' refers to a fake penis or a 'dildo' commonly used by female-to-male transsexuals (and sometimes lesbians) for penetrative sexual intercourse.

SP: That is very much part of the dynamics of being an audience member. But there is always the chance that by doing something that is so off the wall you actually make the thing that you are criticising almost, I'm reluctant to use the word, but almost normal. So that is my concern about radical performance.

NMW: People will interpret things how they interpret them, I mean I am not responsible for the individual audience reaction. When I do "What Makes A Man?" I leave the audience having sighted the drag queen and having been naked, as a man. I leave as a man, with man's shirt, man's trousers, and body language, which I do very consciously and walk out through the audience so that I'm walking and moving as a man, and some of them come up to me afterwards and they are convinced I'm a man because that is the last image I left them with. But still they have seen the body differently, they see me perform female, they have seen the body look female, so that question must still be lodged there somewhere deep in their subconscious. Even if they then slap a gender on me.

In the performance piece "What Makes a Man?" Norrie May Welby describes the way gender is performed through body posture, movement and voice. Welby begins the piece as a male impersonating a female. Femininity is signified through decoration, voice and body movements. S/he strips off the drag revealing a body that has no penis and female breasts. Welby's corporeality signifies femaleness introducing a double cross-dressing to the beginning of the performance – one in which a female impersonates a male impersonating a female. Welby then proceeds to dress this 'female' body in men's clothing at the same time signifying masculinity through male body movements, voice and speech patterns. It is a performance that is about the performativity of gender. For the social theorist it represents an ironic doubling (or perhaps even parody) of Judith Butler's (1990, 1993, 1997) theory of the performative.

Butler (1990: 24-25) argues that gender and the gendered subject are not pre-given entities. Instead, gender and subjectivity are continually constituted and reconstituted in the very moment that gender identities are performed. Butler argues that '[t]here is no gender identity behind the expressions of gender; that identity is performatively constituted by the very "expressions" that are said to be its results' (Butler, 1990: 25). How gender is done in the everyday practices of individuals is 'compelled by the regulatory practices of gender coherence' (Butler, 1990: 24). The regulatory practices associated with binary gender categories are maintained through lines of connection between bodies, genders and (hetero)sexuality; she terms this triad 'the heterosexual matrix' (Butler, 1990: 5). Heterosexual desire requires and reproduces discrete oppositions between male and female, masculinity and femininity (Butler, 1990: 17). Historical and cultural variation within gender categories are the discursive/cultural means by which 'sexed nature' or a 'natural sex' is produced (Butler, 1990: 7).⁵ Rather than conceiving of gender as that which overlays 'natural' biological differentiation,

⁵ Thomas Laqueur's (1987, 1990) discussion of the cultural construction of the sexed body is outlined in Chapters Two and Seven.

Butler asserts that these assumed 'prediscursive' differences are cultural constructions. Transgendered bodies and performances disrupt assumptions about the continuity between sexed bodies, culturally constructed genders and heterosexuality. Judith Butler, for example, argues that drag is not an imitation of a prior and original gender; instead it demonstrates that both 'drag' and 'gender' are performatively constituted:

In imitating gender, drag implicitly reveals the imitative structure of gender itself - as well as its contingency (Butler, 1990: 137 italics in the original)

Drag is subversive to the extent that it reflects on the imitative structure by which hegemonic gender is itself produced and disputes heterosexuality's claim on naturalness and originality (Butler, 1993: 125).

It is significant that Welby opens his/her act as a drag queen. The drag queen is a familiar cultural trope in which a sexualised, hyper-femininity is understood as a facade. During the performance different male and female characters are introduced. Once audience members become acquainted with these characters, another layer of imitation is revealed. In the performance both drag and gender are overtly presented as an imitation that troubles the authenticity of the gender that is being imitated. Norrie May Welby is a thinking subject who uses drama to appropriate and subvert dominant identities in order to challenge them. This critically reflexive subject, who reads, engages with and uses performativity theory subversively, is not anticipated in Butler's theory of the performative (Allen, 1998: 466-467; Nelson, 1999). While agency has its origins in the subject; it is not the intentional liberal humanist subject who enables action (Butler, 1990: 144-147; 1997: 7). Instead, agency is constructed and enabled in and through 'unpredictable' and 'inadvertent' variations in the practices of repetition (Nelson, 1999: 343). It is in these slippages that new and subversive possibilities for the expression of gender may be produced. Norrie May Welby indicates that s/he has an awareness of how (gendered) agency is constituted in discourse and in his/her own performances of gender. It is through Welby's talk about performing gender that the relationships between agency, embodiment and performativity are explored in this chapter.

***Habitus*, field and performativity**

Sociological analyses of performativity focus on action in relation to the social dimensions of cultural production – the actual embodied doing of the social. According to this view, performance is part of everyday life; it is a way of generating meaning through embodied processes and practices (Smith, 1990). For Pierre Bourdieu these embodied processes and practices are part of the '*habitus*' (Bourdieu, 1977, 1992). Butler (1997: 152) usefully describes the *habitus* as 'those embodied rituals of everydayness by which a given culture produces and sustains belief in its own "obviousness"'. Bourdieu's (1977, 1990; Bourdieu and Wacquant, 1992) theory of the *habitus* emphasises the reproduction of the social through routinised practices that are structured and organised within the social fields in which people are embedded. While *habitus* is structured by what Bourdieu refers to as 'the field' – the networks, meanings, rules and institutions that constitute social identities – the social actor's perceptions of the field are provided by the *habitus* (Bourdieu and Wacquant, 1992: 127). Gender, for example, is produced within the individual through primary socialisation into codes of masculinity and femininity. These codes are provided by the fields in which gender relations are embedded.

The field is elusive, and in ordinary interaction gendered practices are taken-for-granted. Bourdieu (Bourdieu and Wacquant, 1992: 168) argues that hidden structures of domination produce identities/people. He explores the subtle processes whereby 'cultural values' are 'made body' (Bourdieu, 1977: 94). Drawing on Goffman, Bourdieu argues that corporeality inscribes and is in turn inscribed by the political oppositions between males and females 'which organize the whole system of values (that) reappear, for example, in the gestures and movements of the body...'. (Bourdieu, 1977: 94). 'Bodily hexis' (Bourdieu, 1977: 93-94) refers to the routinised performances embodied in the way in which people dress, stand, speak, think and feel. The *habitus* in this view is 'the social made body' (Bourdieu and Wacquant, 1992: 127). Butler's arguments about the disruptive potential of the performative may be read as a critique of Bourdieu's concept of the *habitus* as routinised practices. Butler's attention to a *habitus* that is structured within 'the conventional games of the social field' (Butler, 1997: 154) leads her to argue that 'Bourdieu fails to take account of the way in which a performative can break with existing contexts, refiguring the terms of legitimate utterance themselves' (Butler, 1997: 150). I argue that the field is precisely the site where these contests over meaning are in play.

Bourdieu's (Bourdieu and Wacquant, 1992: 97) concept of the field encompasses the social conditions that organise and legitimate particular social/gender identities and social/gendered practices. Perceptions of the field and the codes that it sustains are provided by the *habitus* - the way in which people do masculinity and femininity in everyday interaction. In this view both *habitus* and field are interactive (McNay, 1999: 100) - comprised of 'objective relations' that 'exist independently of individual consciousness or will' (Bourdieu, 1990: 56; Bourdieu and Wacquant, 1992: 96-97). The limits and boundaries of the field are marked by institutionalised exclusions that are defined by the field itself. These exclusions, which may or may not be formally written into law, are potential sites for political action and change. As a result, the boundaries of the field are always contestable. At each moment it is the state of relations between actors and institutions that define the structure of the field (Bourdieu and Wacquant, 1992: 99). The field is dynamic - a place of struggle and therefore a site of potential disruption and change (Bourdieu and Wacquant, 1992: 101-102).

Norrie May Welby's performance brings together three fields - art, gender and transgender politics - in order to draw attention to how the social codes of gender are regulated through institutionalised forms and reproduced in everyday interaction. Practices that are intelligible within the field are juxtaposed against those that are not, drawing attention to where the limits of the field are located. Forms of 'bodily hexis' - dress, voice, gestures and movements of the body - are used to contest the political oppositions between male and female. Signifiers of masculinity and femininity move in and 'out of phase' with the anatomical body, drawing attention to the bodily practices that are sanctioned within the fields that organise contemporary gender relations. Social conventions surrounding gender suggest, for example, that it is not possible to have a male voice, posture and body movements, breasts and an absent penis. Performances of gender that are positively sanctioned (masculine men and feminine women) and those that are not (effeminate men) also illustrate the forms of symbolic capital⁶ that operate within the field (Krais, 1993: 170-171). Actors are defined by the field, but they may also transform partly, or completely, the rules/configuration of the relations of force/meanings that make up the field (Bourdieu and Wacquant, 1992: 99). Welby is defined by the field, but his/her stage performance also troubles the

⁶ Symbolic capital in this context refers to reputation, prestige and social honour. This could be interpreted as 'social status'. Status is often associated with political entitlement and legal location within civil society. But status also incorporates the idea of style. Social status involves cultural practices that emphasise and exhibit distinction and differences such as those involving dress, speech, outlook and bodily dispositions (Jenkins, 1992: 130).

meanings about sex and gender that make up the field. In the naked version of his/her performance Welby suggests s/he is able to convincingly present her/him -self as male (a man without a penis) or female (a woman with a vagina). In this example, Welby uses his/her body to draw attention to the fields through which gender is inscribed on the body and institutionalised as naturalised difference. My reading of Bourdieu is that *habitus* and field are constantly in play, and as such, transformations in the field may also effect changes in the *habitus*.

In Chapter Two I argued that stories, contexts and bodies are important to the representation of a gendered self. Gender, and the gendered subject, achieve their stability and coherence through the combination of a series of embodied repetitions of gender norms (Butler, 1990: 145; Nelson, 1999: 331, 338). As a result, the contingent and constructed nature of gender may be illustrated through slippages in the stylized repetition of gendered practices (Butler, 1990: 140). Bourdieu (1990: 57-58) also suggests that when bodily practices match the *habitus* an illusion of 'durability' and 'universality' is produced. The *habitus* is most visible in bodily practices that are 'out of phase' with the social conditions in which they were produced (Bourdieu, 1990: 62-63). Welby suggests that he initially changed gender because he encountered resistance to being a 'feminine male':

My motive in changing gender in the first place was to have the power to express myself without this bullshit. And I initially found that I couldn't do that as a male behaving femininely, as someone that was more female behaving femininely I had permission to be myself that was the power. And then I grew and evolved and really took on board feminism and practically that meant I started to act in ways that were labelled androgynous, and I've claimed that power too.

Norrie May Welby, 1997

A 'feminine male' is incompatible with the limited range of embodied dispositions that are intelligible within the gendered social field. Welby changed his gender so that his behaviour was no longer 'out of phase' with the *habitus*. His/her narrative illustrates the forms of gendered symbolic capital that operate within this particular field. A male behaving femininely has less symbolic capital than a female behaving femininely. Exposure to feminist theory enabled Welby to understand how social practices are regulated through the construction of sex, gender and heterosexuality as normative. Welby states, for example, later in the interview that as a woman s/he found that "gender play is not flattering, even if it reinforces your (female) gender

identity, because gender in our society is a power relationship". For Welby, taking on an androgynous identity is a way to both escape and challenge this power relationship.

Bricolage and stage(d) performances

The social meaning(s) attached to Welby's stage performance are dependent upon the way s/he is positioned by self and other in and through the performance. Welby is located in and locates him/her -self in subject positions that are in turn embedded in historically and culturally specific understandings about the social structures and expectations associated with those positions. Man and woman are already constructed categories; cross-gendered performances critique gender representations that are already encoded in a system of signification (Garber, 1998[1992]: 181). The transgender performer is both a 'signifier and that which signifies the undecidability of signification' (Garber, 1998 [1992]: 179). Welby's performance, for example, embodies and enacts a slippage from sex to gender, male to female, masculinity to femininity. In doing so, it demonstrates how inclusion in one category is dependent upon exclusion from its opposite (Garber, 1998 [1992]: 179). As a result, Welby's transgender performance draws on both authorised and unauthorised gender conventions. It does not involve a radical break with prior conventions; rather the subversive meanings associated with Norrie May Welby's gender performances are dependent upon differences that are defined in relation to the traditional and the ordinary. In this regard, transgender performance is both subversive and conventional.

Queer/transgender performance involves the simultaneous production and subjugation of subjects through creating a 'space in which norms about gender are mimed, reworked, resignified' (Butler, 1993: 124-125).⁷ People who transition across binary gender categories may be viewed as bricoleurs (Levi-Strauss, 1966; Hebdige, 1979: 103-106) who improvise in constructing their narrative identities out of public discourses of sex and gender. Drawing on Roland Barthes' (1982 [1956]: 100-102) arguments about signifier, signified and sign, Hebdige (1979: 106) describes bricolage as the 'juxtaposition of two apparently incompatible realities in order to disrupt and reorganise meaning'. Bricolage is the process of changing or subverting the role of an

object in order to convey a different meaning. Welby's performance appropriates objects typically associated with one gender and reassembles them in order to disrupt or challenge categories of sexual difference. This bricolage is made possible by the creation of the space in which the transgender performance is located.

In Welby's performance the body is the object, sign and subject of subversive appropriation. Artifacts associated with masculinity and femininity, and ideas about sexual difference, are also brought into service as props for this performance. Corporeality is used to draw attention to the ordering of nature and the ordering of society and in the process new meanings about this relationship are produced. Welby's performance is aimed at the subversion of common sense in order to trouble oppositional categories through a celebration of the abnormal and forbidden (Hebdige, 1979: 104-105). In Norrie May Welby's stage performance gender is presented as an imitation that troubles the authenticity of the gender that is being imitated (Dean, 1993: 2). Welby suggests that movement and the appearance of the body provides 'cultural clues' as to the shifting gender identity of the performer. The performance works because Welby's sex is uncertain. But gender also becomes an illusion cobbled together through signs and references, the meanings of which shift throughout the performance. The performance is ingenious because Welby simultaneously disrupts biology, gender and representation, leaving the audience with no stable referent. It is a performance that would not be possible if gender was simply a set of objective relations that exist independently of 'individual consciousness or will' (Bourdieu, 1990: 56). It is also a performance that is deliberate and strategic rather than the result of an 'accidental' slippage in the regulatory practices of gender coherence (Butler, 1990: 24). In this regard Welby's stage performance extends both the *habitus* and Butler's theories about the performative.

During Welby's stage performance, identities are crafted, modified and abandoned through actively locating him/her -self in public narratives surrounding sex and gender, masculinity and femininity. Welby's cross-gendered performance indicates that subject positions are not just discursively produced they are also embodied and spatial. Stage

⁷ See Gregson and Rose (2000) for a discussion of the performative qualities of space. Gregson and Rose (2000: 446) argue, for example, that 'performances articulate their own spatialities, as opposed to being just located in space'.

actors are allowed to violate the social codes surrounding gender and sexuality.⁸ The stage in this view becomes a privileged site of transgression (Garber, 1998 [1992]: 178). Welby's transgender performance creates a space in which essentialist ideas about identities as coherent, consistent and linear may be disrupted through the presentation of selves that are simultaneously interchangeable and transgressive. Welby refers to both gender ('I demonstrate that gender is performance') and to sex ('this person is naked and I don't know what sex they are'). When the categories of sex and gender are disrupted in this way (hetero)sexuality is also called into question. If it is not possible to tell what sex a person is, it is no longer possible to make assumptions about their sexuality (or the sexuality of their partner). Welby's transgressive performance troubles dualistic understandings of gender and at the same time it calls into question the sets of social codes by which categories of sex and sexuality are policed and maintained (Garber, 1998 [1992]: 177). In talking about and doing the performance s/he demonstrates that these categories are interchangeable if not equivalent (Butler, 1990; Garber, 1998 [1992]: 177). Welby troubles the meanings that make up the fields of sexuality and gender. In doing so heterosexuality is troubled through drawing attention to the social codes of, and perceptions about, normative sexuality that operate within the field.

The slippage from sex (male/female) to gender (masculinity/femininity) performer to audience in this talk mirrors the slippage between these categories in the performance itself. Welby describes his/her performance as one that educates at the same time as it entertains. As a result, the audience is not constructed as a passive spectator of the performance. The anonymous spectators in Welby's narrative are conservative and heterosexual - they may have gender issues but they are not 'transgendered' according to Welby's use of the term.⁹ Welby's performance encourages the audience to 'read' Welby's body in a number of ways. During the performance the sexed body goes through a series of transformations. Does Welby's performance denaturalise and subvert the norms associated with sex, gender and anatomy? Welby's critical gender performance involves a re-staging of the terms through which gender is constructed. Welby uses the *habitus*, represented in forms of 'bodily hexis', to shift the covert assumptions and meanings within the field in which

⁸ In Elizabethan England, for example, the stage was exempt from the sumptuary laws that dictated dress codes for class and gender (Garber, 1998 [1992]: 178).

gender relations are constituted. S/he takes up and disrupts commonsense understandings about the relationship between anatomy and social gender. Through juxtaposing unintelligible gender performances with intelligible ones s/he draws attention to the institutionalisation of gender and heterosexuality in routinised bodily practices. The performance, however, may acquire new meanings and/or interpretations that are not intended by the performer. Welby talks about how s/he is constituted by discourses about sexual difference by the (male) gender that people use to address 'him' after the performance. Transgender performance is caught in this tension between appropriation, subversion, and reinscription through hegemonic understandings about the relationship between sex and gender.

Welby draws attention to the body as the instrument through which public narratives about male and female, masculinity and femininity are enacted. Corporeality is used to demonstrate the interchangeability of sex and gender. In doing so s/he indicates that these concepts are not mutually exclusive, ahistorical or natural. Butler argues that cross-gendered performances, such as drag, trouble 'naturalised' lines of connection between biology, gender and sexuality and the social codes by which these connections are policed and maintained:

To claim that all gender is like drag, or is drag, is to suggest that "imitation" is at the heart of the heterosexual project and its gender binarisms, that drag is not a secondary imitation that presupposes a prior and original gender, but that hegemonic heterosexuality is itself a constant and repeated effort to imitate its own idealizations (Butler, 1993: 125).

Butler (1993: 127-128) is critical of radical feminist interpretations of cross-dressing as offensive because it is based on an imitation that involves ridicule and degradation of women. In these feminist critiques male-to-female cross-dressing is interpreted only in terms of a misogynistic male homosexuality.¹⁰ Butler suggests that

⁹ For Welby 'transgender' involves a refusal of gender categories. The assumption here is that the majority of people who have 'gender issues' do not question binary gender categories or affirm an identity that is in between.

¹⁰ Peggy Phelan (1993: 101) argues that '(g)ay male cross-dressers *resist* the body of woman even while they make its constructedness visible. This is in part why the misogyny which underlies gay male cross-dressing is so painful to women' (italics in the original). Jance Raymond (1979:103-104) equates MTF transsexualism with rape. 'Rape, of course, is a masculinist violation of bodily integrity. All transsexuals rape women's bodies by reducing the real female form to an artifact, appropriating this body for themselves... Rape, although it is usually done by force, can also be accomplished by deception'. Stone (1991:283) claims that *The Transsexual Empire* is 'still the definitive statement on transsexualism by a genetic female academic'.

this analysis makes drag about reinscribing the 'heterosexual matrix' at the centre of male homosexuality.¹¹ The way to oppose the reduction of drag to the misogynistic appropriation of women is to call attention to the way it destabilises and denaturalises gender and therefore troubles assumptions about the connections between sex, gender and (hetero)sexuality (Butler, 1993: 128). Butler cautions that this analysis is tenable only as long as there is a rupture between the idealised norm and the performance. When this rupture cannot be read into the performance, as in the case of transsexuals who successfully pass as women, then the radical potential of drag is subverted (Butler, 1993: 129). Ki Namaste (1996b: 188-189) argues that Butler's reduction of drag or transsexualism to performances of gender denies the possibility of (essentialist) subject positions to people who identify as transgendered. Namaste also suggests that Marjorie Garber (1992) reduces the transvestite to a textual figure, denying the possibilities of viable transgender identities.¹² Sally, a post-operative transsexual and former member of *Les Girls* says that she felt 'degraded' when people refused to acknowledge that 'she' was a 'real' person:

We (female-to-male transsexuals and drag queens) are confronting to people, confronting to feminists and to females, a lot of men think oh that bloke looks beautiful, it must not be a bloke. Particularly with *Les Girls* you often hear the comment "they are more beautiful than real women". On the one hand, that might sound good, but it is really degrading because they are really just saying it's just drag, you might as well be a mannequin in a store. The way they treat you as if you have got no feelings or anything like that because you are not a 'real' person. Everything about you is artificial, your eyelashes, your tits and everything else.

Sally, MTF, 1997

Sally wants to pursue 'realness' and to be taken seriously as a woman. She is insulted by the idea that her whole female persona may be interpreted as inauthentic because

¹¹ Phelan (1993: 99) for example suggests that 'male cross-dressing makes manifest the psychic structure of "traditional heterosexual culture" – which is to say homosocial culture'. Woman is a necessary point of tension because she reflects and assures male authority'.

¹² Transgender activists, such as Namaste, associate Butler's ideas about the performativity of gender with a form of discrimination that they experience within gay and lesbian communities. Gay and lesbian identities are presented as 'natural' prior to performance. Transgender identities are considered to be enacted through performances of gender and therefore to be 'unnatural' or 'fake'. Drag performances, for example, are often limited to forms of entertainment within gay and lesbian communities. In Sydney transgendered people are the showcase for the annual Gay and Lesbian Mardi Gras but their contribution is not recognised in the title of the festival. These examples underpin issues of power within queer communities. As a result, Butler's theories about the performativity of gender, or Garber's textual analysis of transsexualism, may be problematic for transgendered people who want to be able to pursue 'realness' or 'essentialist' identities in the same way that gay and lesbian people are able to in queer spaces. Post-structuralist theories of identity, in contrast, explore the way that gay, lesbian, transgender and gender identities are not 'natural' or prior to culture but 'performatively constituted'.

she dresses as a drag queen and imitates hyper-femininity on stage. Sally makes a distinction between imitating gender on stage and doing gender in everyday life. For Welby this distinction is blurred. Sally's radical performance on stage destabilises gender troubling heterosexual desire ('that bloke looks beautiful, it must not be a bloke'). In everyday life this radical potential is lost because Sally is able to pass successfully as a woman (although sometimes she strategically claims a transgender identity in order to disrupt stereotypes about transsexuals as 'males' who are obviously dressed as women). In Sally's world subversion and conformity are part of the same game - Sally chooses when, where and how she plays it.

Welby, unlike Sally, did not confine his/her performances of gender to the stage. The politicisation of identity through imitating gender was also a strategy that s/he used in everyday locations such as the street or nightclub. In the following narrative s/he comments on how people reacted to him/her in social situations when s/he is able to be read as a male wearing a dress and behaving femininely. In these situations men sometimes react to him/her by performing hyper-masculinity:

I notice performances of gender, I'm conscious of that point. I notice that a lot in tranns (laugh). I notice it particularly were people feel confronted by me being very obviously transgender, and will try to, or people, maybe when I'm not being obviously transgender, maybe if I'm being more apparently feminine and they think they have sprung me as a woman, as a tranny, and go: "How are you mate". You know when I'm wearing a dress, and they are doing a parody, they are doing almost a characterisation of a male role. Like trying to treat me as a male and their performance: "Hello man, mateship, mate, blah blah blah". And so I parody that right back at them. So even people performing one gender perform that in terms of parody very often.

Norrie May Welby, 1997

Hyper-masculinity and performances of gender that trouble lines of connection between social gender and anatomy expose the social field in which gender relations are constructed. Gendered self-parody involves variation on repetitive bodily practices that illustrate the performative status of the natural. Parody may also serve to consolidate the distinction between naturalised gender configurations and those that appear to be a copy. Sally, for example, talked about how she experienced parody as a consolidation of 'natural' gender through the association of 'her' with the inauthentic and the fake. In this regard, parody may result in the exclusion of marginal genders from the territory of the mainstream and the 'real' (Butler, 1990: 146-147). The radical potential in parody is located in its disturbing of the very notion of a 'natural sex' or a

‘real woman’. In this regard, transgender performances trouble essentialist understandings of identity in which sex and gender are naturalised as ‘universal’ and ‘ahistorical’ (Butler, 1990: 138). The next section of the chapter explores Welby’s talk about how s/he performs gender in everyday life.

The doer behind the deed

Welby’s performance of gender in everyday life, like his/her stage performance, is both subversive and conventional. Welby claims a gender identity that is neither gender and both genders enabling him/her to trouble the meanings about sex, gender and sexuality that make up the social field. Norrie May’s post-structuralist account of his/her gender as shifting, contingent and contradictory, also incorporates an embodied choosing subject. A knowing agentic subject is not a significant feature of Butler’s (1990, 1993) theories of the performative (Hughes and Witz: 1997: 53; Nelson, 1999) and Bourdieu’s concept of the *habitus*. Repetitive and consistent bodily practices are the means through which an illusion of universal and durable binary gender relations are sustained within the *habitus*. Bourdieu pays attention to gender inflected practices through his observations about the way in which cultural values are reflected in the appearance, gestures and movement of the body. For both Bourdieu and Butler gendered practices/performances are a product of habit and repetition. Therefore, they are practices that are without the forms of conscious thought or agency that characterise liberal humanist understandings of action.¹³ Welby’s stage performance, and talk about the way bodies, gender, sex and sexuality, are constructed and enacted in the everyday world, provides an opportunity to explore intersections between performativity theory, ‘gender inflected embodiment’ and personal lived history. I argue that Welby’s narratives about sex, gender and sexuality are critical and reflexive invoking a post-structuralist understanding of subjectivity as partial, unstable and contested. At the same time his/her experience of gender is shaped by complex historical, social and political processes in which essentialist understandings of identity located in the ‘natural’ pre-discursive body and an embodied choosing Enlightenment subject are at play.

¹³ Liberal humanist concepts of agency are premised upon a knowing subject who makes rational choices, and takes responsibility for those choices based on moral imperatives (Davies, 1991: 42-43; Davies, 2000: 166). See chapter six for further discussion of liberal humanist and post-structuralist theories of agency.

Elizabeth Grosz defines essentialist ideas about gender as the 'attribution of a fixed essence to women' (or men) founded in either biological or natural characteristics, psychological processes and/or social practices. For Grosz (1995: 47-48) essentialism refers to 'the existence of fixed characteristics, given attributes, and ahistorical functions that limit the possibilities of change and thus of social reorganisation'. In relation to femininity, essentialism refers to a pure untainted 'natural' female essence which exists outside of, or prior to, the social. Essentialism is usually defined in terms of a fixed set of differences and as such has been positioned in opposition to post-structuralism (Fuss, 1989: xii, 2). Similarities between *habitus* and essentialist ideas about identity within feminist theory may be identified in relation to how social differences between men and women are internalised as forgotten history (Bourdieu, 1990: 56) or naturalised through stylised repetitions of gendered practices (Butler, 1990: 140). Bourdieu's attention to naturalised bodily practices within the *habitus* connects to Butler's (1990: 7) critique of the naturalisation of sexual difference through the sex/gender distinction.

Throughout the interview Welby indicates that s/he has had exposure to recent feminist scholarship that questions the naturalness, or neutralness, of biological sex as the basis for understandings about differences between men and women (see Martin, 1987; Butler, 1990; Haraway 1991; Fausto-Sterling, 1993; Bornstein, 1994). Social constructionist theories suggest that the subjective significance and cultural meanings associated with essentialist understandings of gender and sexuality are dependent upon the historical, geographical and social contexts in which they are embedded (Vance, 1992: 133-134). Social constructionist theory posits that lines of connection between subjectivity, biology, gender and sexuality are not fixed but constructed at the level of culture and history. According to this view, the categories of sex and gender are discursively produced and legitimated through the oppositional relationship that is constructed by the respective alignments of sex and gender and nature and culture. Dominant understandings about physiological and social differences between men and women are based on dualistic understandings about the relationship between and within sex and gender categories.

Drawing on, and reworking, post-structuralist theories, feminists have critically interrogated the networks, meanings, rules and institutions through which gender identities and (heterosexual) social arrangements are constituted as 'natural' and universal (Martin, 1987; Treichler, 1990; Butler, 1990, 1993; Gatens, 1996).¹⁴ The 'philosophical field' (Jenkins, 1992: 86) has not escaped this critical gaze as feminist theorists have also interrogated the reproduction of normative social arrangements in the field of social theory itself (Gatens, 1996; Witz, 2000). Moira Gatens (1996), for example, explores the way that the body politic within social and political theory is constituted through institutionalised exclusions that are at work in the theoretical and political fields. Gatens suggests that the 'neutral' body of social and political theory is implicitly coded as male excluding women from the body politic.¹⁵ Welby also draws attention to the social and medical fields through which biological sex is constructed and reproduced as naturalised difference. S/he argues that biological differences between the sexes are social constructions:

We may need to acknowledge that socially constructed also means constructed out of what? Out of possibly genetically pre-determined factors, but how these factors manifest of course is constructed by society... What turned on the light for me was when I read about intersexed children and I realised that even nature does not agree with the view that we have to be men or women. Are there more than two sexes? Well that begs the question of defining sex. If you are defining chromosomally, yes there are more than XX and XY. Although there is a presumption that's not the case. If we define sex as a biological thing then there are only two aspects to sex, you know the production of sperm or the production of ova, in terms of biological reproductive sex but even that is not necessarily divided into two individuals, because you can have one hermaphrodite that can produce both.¹⁶ And we have many individuals that produce neither... When I was finally confronted by what with me proved that nature disagrees with the view that we are male or female, and that one sex precludes the other, and that it is very exclusive, and that was the turning point for me and I then applied that to myself and to society. I don't feel it is mutually exclusive, transgender is a category that we only came up with in the last few years "the transgender community".

Norrie May Welby, 1997

¹⁴ For critical analyses of social and cultural constructions in medical descriptions of the female body see Martin (1987) in childbirth see Treichler (1990). Butler (1990, 1993) provides an important interrogation of naturalised difference within cultural narratives about sex and gender. Gatens (1996) explores the situated body in political theory.

¹⁵ See Chapter Eight for an extended discussion of Gatens' arguments.

¹⁶ Welby refers here to the very rare *hermaphrodite regis* who is fertile as both male and female – they may menstruate and produce sperm but not necessarily concurrently.

Reading about intersexed children enabled Welby to realise that genetic, chromosomal, hormonal, reproductive and biological sex differences do not map neatly onto male and female bodies. If there is no biological site for the unambiguous determination of binary sex categories, then both sex and gender must be social rather than 'natural' categories. The bodies of intersexed children represent the 'natural', and therefore undeniable truth, that sexed differences between males and females are not mutually exclusive. If biological sex is both/and or neither then it becomes possible to understand that social differences between men and women may also be both/and or neither. At the same time the realisation that sex and gender are social categories enabled Welby to affirm transgender as an alternative identity category. Instead of trying to make him/her -self fit binary gender categories, a strategy that s/he had pursued in the past, s/he instead questions the categories of sex and gender themselves and the social exclusions that these categories legitimate. For Welby, intersexed bodies prove that:

Nature makes a dupe of things that don't fit with our ideas of what should be,
and the problem is not the territory, the problem is our road map.

Norrie May Welby, 1997

Welby locates his/her refusal to accept binary gender categories in a form of biological essentialism that is based *in* the 'natural' anatomical bodies of intersexed children. Reading about intersexed bodies enabled Welby to realise that in some cases anatomy does not determine social gender. In this example, Welby's narrative, which is directed at empowerment and control, also incorporates a 'master script' about a denial of sexual difference that is based in biology. At the same time this agentic story-line is also disruptive of conceptual narratives about sex and gender as mutually exclusive, 'natural' categories. Welby's experience of gender is shaped by his/her location in a particular temporal and spatial field where complex social and political redefinitions of sex and gender are in play. His/her narrative draws on post-structuralist critiques of the 'natural' and understandings of identity as fluid and contingent, essentialist understandings of identity located in the 'natural' pre-discursive body, and an embodied choosing Enlightenment subject.

Social construction theory posits that lines of connection between subjectivity, biology, gender and sexuality are not fixed but constructed at the level of culture and history (Vance, 1992: 133-134). Within this analysis the social is a discursive field that provides

subject positions for actors. Welby refuses to position him/her –self as a gendered subject. This refusal is a deliberate and strategic act that forces people to decide for themselves whether Welby is male or female. The ambiguity of his/her gender in everyday interaction, like his/her stage performance, forces people to confront the taken-for-grantedness of binary gender categories. At the same time Welby acknowledges differences between people who affirm transgender as an identity category and those who do not:

My personal solution is to not identify as having a fixed gender and to let other people decide whether I am male or female or neither or both and I've become comfortable with that. Other transys insist on having their personal agenda validated at the same time as acknowledging their transgenderedness. Others want to deny their transgenderedness and pursue real women and insist on that. I'm talking very much about male to female here, but many of these are applicable the other way too.

Norrie May Welby, 1997

Welby suggests that s/he is comfortable with allowing other people to position him/her as a gendered subject. Essentialism is brought into service as an explanation for differences between transgender people who want to pursue 'realness' and those, like him/her-self who do not. Welby is also critical of transsexuals who pursue essentialist approaches to identity:

I think that people who want to jump into one gender from the other have no idea what gender truly is. Why jump from one jail into the other? Like they just have not got, or even had presented, the idea that gender is a social construction. A lot of transys still think that their identity is their truth. That their identity is intrinsic to their being, and that if you threaten their identity and call them 'him' or a 'bloke' then you are threatening their being.

Norrie May Welby, 1997

Identities are thwarted and/or confirmed through the language that people use to address an individual. Self-hood is threatened when these forms of address do not match the gender identity of the person being summoned (Butler, 1997: 2). Welby suggests that the ideas about selves, used by other transys, are based on essentialist understandings of their gender identity as 'intrinsic to their being'. Essentialist discourses were not confined to Welby's descriptions of other transsexuals who wanted to pursue 'realness', or who considered their social gender to be their 'true' identity. In the following narrative s/he draws on essentialist and social constructionist

understandings of identity to make sense of his/her experiences of gender. The view Welby had on gender before s/he internalised 'society's views on gender' may be read as an essentialist position. S/he also identifies values, or sets of understandings, about maleness and femaleness as social constructions. Both essentialism and social constructionism are used as ways of explaining his/her experiences and articulating his/her subjectivity. Sets of understandings about the way gender identities are constructed are set in opposition to essentialist ideas about a natural pre-given 'gender'. Inclusion in one category is articulated by refusal of the other:

I've gone back to my view on gender that I had before (I internalised) society's views on gender. It is not essentially something new. It is something I can now talk about with other people, because the language did not exist before, but it is not something that has come out of the woodwork, it is not something that has come out of the blue, it is something that rings true for me, for my sense of self before I was given all these values about maleness and femaleness.

Norrie May Welby, 1997

Norrie May Welby is resistant to transsexuals who insist that their 'gender identity is their truth' and at the same time s/he asserts that a gender-free pre-existing self is his/her 'truth'. Welby acknowledges the centrality of language to his/her ability to articulate his/her experiences of gender. This acknowledgment of the way that language constitutes the subject, that subjectivity is spoken into existence, is reminiscent of a post-structuralist account of subjectivity. However, s/he draws on an essentialist notion of gender, as a pre-discursive or natural maleness or femaleness that may be revealed through stripping away the artificial layers of culture. One reading of the way essentialism is deployed in this extract could be that, given a lack of fit between transgendered subjectivity and embodiment and biological essentialism, Norrie May attempts to fix gender in relation to a pre-discursive self. The continuity of the subject is achieved through a denial of discourses about male and female as mutually exclusive categories and through an appropriation of discourses that locate that continuity in a pre-discursive identity that precedes social gender and its association with biology (maleness and femaleness). Biological essentialism is refused and an essentialism based on the pre-discursive as the 'natural' embraced. The complexity of this discursive positioning of self requires attention to both social constructionist and essentialist understandings of identity. It also suggests that there is not one essentialism, but many essentialisms that can be deployed in multiple, complex and contradictory ways.

Recognition of diverse essentialisms allows for an understanding of the ways in which essentialism itself is constructed through complex historical, social and political processes which shape and continue to shape individual experiences of gender.

In Chapter Two I discussed the gendered nature of language while in Chapter Four I considered how non-linear stories expose the difficulties of self-representation for people whose gender identities are in between. Norrie May Welby also comments on the difficulties of self representation within language for people who are both/and or neither:

People have (been) brought up in a society where we are either male or female so yes, and we don't have pronouns that are not gender specific, it is either he or she and 'it' is taken to be derogatory. In English we have third person plural that can be used where the gender is not known or is ambiguous, or when you don't want to specify. I use that a lot in my life. I believe that generally this kind of work is very influential in changing society, and it helps get the ideas out there amongst the population. Movies like 'Priscilla' do that a hell of a lot. Some queens complain: "Oh that is not how we really are". Or: "It is made for a heterosexual audience". Of course, there is no point in preaching to the converted. If you have already got a queer consciousness you don't need to be converted to it.

Norrie May Welby, 1997

Judith Butler (1997: 7) draws attention to language as the instrument through which power is exercised. She argues that through the social rituals of naming and addressing each other 'we are formed in language constituted in its terms' (Butler, 1997: 2). Welby draws attention to the way dualistic categories of gender are incorporated into the forms of language that are used to refer to a person. For Welby, the erasure of transgendered people from the signifying economy is demonstrated by the lack of personal pronouns in the English language that are not gender specific (he/she, him/her) and unlike 'it' also have a positive meaning. Norrie May Welby refuses to name him/her -self using gendered language. Instead, they appropriate 'third person plural' (their/them/they) using singular and plural in the same sentence in a way that is disruptive of the conventional structures of language. Mimicking Welby's use of language I wrote, in Chapter One for example, that I interviewed 'one person who used *their* (not his/her) ambiguous body in order to challenge binary notions of gender'. Welby considers this strategy of linguistic refusal and appropriation to be a political act.

Destabilising heterosexuality through performativity

One way to affirm transgender identities has been to assert their differences from male and female through an articulation of new discourses about gender that do not appropriate or sustain the male/female dualism (Butler, 1993: 128). Butler (1990: 141) argues that the loss of gender norms would have the effect of proliferating gender configurations and destabilising heterosexuality, both of which require discrete oppositions between male and female, man and woman. This idea has been taken up by transgender activists, such as Kate Bornstein (1994), who advocates a third space that is outside of male and female. Welby also claims an identity that deconstructs dualistic understandings of sex and gender by incorporating oppositions between male and female, man and woman, gay and straight:

I describe myself as spansexual. I explain that to people in terms of a bridge spanning the two genders, which has simply two aspects. And like a bridge I am in both places at once, and travel from one space to the other, a bridge spans the divide.

Norrie May Welby, 1997

During the course of my research in Sydney several of the people that I interviewed identified Welby as someone who lived in a space that was outside of, or in between, male and female. I asked him/her what s/he thought about Bornstein's (1994) arguments about 'third space' and other research participants' identification of him/her as someone who occupied that space:

SP: So would you be a transgender person who lives in the third space, what Kate Bornstein calls the third space?

NMW: I think that depends on your use of her definition (of the third space). I'd like to think about my spansexual definition too. Because I think the trouble with third space notions, as she points out, is that people think it is another category. Whereas I don't want another, I don't want you know male, female new sex, this sex, that sex, third sex, I don't want another division...

SP: Interesting enough other participants that I have spoken to, and have asked that question, "do you think there are some transgenders who are in the third space now?" have named you as the person they would identify as being such a person.

NMW: In a sense in a third space, but it is a space that encompasses the other two. I don't want to get into that there is any male space or any female space, but I also

don't want to buy into the notion that as woman I am not man, or as man I am not woman. As an individual I am both male and female and neither and both. I am wary of third space and I think Kate is also wary of third space because she does not want to be left outside of male and female spaces. She is saying there is maybe not a third space, maybe another way of looking at it, and given that men and women is one way of looking at it, not two ways of looking at, one way of looking at it, I think maybe we are rather than in third space we are looking for a different perspective and new way of looking at things.

Welby is critical of third space definitions which imply another category. Instead s/he suggests that ideas like third space and alternative identities like 'spanssexual' are about creating a new language and/or alternative way of visualising gender that are inclusive of bodies and identities that both conform to and diverge from male and female spaces. His/her use of the term 'spanssexual' deconstructs the opposition between straight and gay which Butler uses to 'explain' transsexual demand for sex reassignment surgery.

In *Gender Trouble* Butler responds positively to butch/femme conventions, but critically to sex reassignment surgery. She both acknowledges that transsexual identity blurs the normative association between 'anatomy', 'natural identity' and 'natural desire' (Butler, 1990: 71) and suggests that transsexualism is a denial of homosexuality that maintains a false association between culturally constructed desires, heterosexuality and anatomy. For Butler (1990: 70-71), the sexed surface of the transsexual body thus emerges as the necessary sign of a natural(ized) identity and desire. Butler suggests that transsexuals who opt for sex reassignment conform to the heterosexualisation of desire and also to the naturalisation of pleasure to gender-specific body parts (i.e. the penis, vagina and breasts). Butler assumes that transsexuals who use gender reassignment technologies to change their gender identities do so in order to enjoy intimate sexual relationships with individuals of the same gender to which the transsexuals were originally assigned. One of my questions in the interview schedule addressed this issue. I asked participants to 'respond to suggestions by some feminists that transsexuals are erotically attracted to those of the same gender and change their anatomy in order to be heterosexual'.¹⁷ Norrie May Welby provided the following answer:

¹⁷ Esther Newton's (1972) 'Mother Camp: Female impersonators in America' suggested, for example, that 'cross-dressing is a cultural expression of the contradictions generated by the social stigma of homosexuality' (Dean: 1993: 4). Tim Dean (1993: 5) argues that Newton implies that if 'no social stigma were attached to homosexuality, then transvestism – and transsexuality – would simply not exist'.

That is so generalised I'm not sure that it dignifies a response. But if we take it not as a blanket statement, but if it is something that may apply to some individuals, yes it does apply to some individuals. Yes we have a homophobic society so a hell of a lot of transys have all this internalised homophobia. There was a tranny at the conference yesterday that wanted to have genital restructured surgery so that she could have heterosexual sex because she did not want to have homosexual sex. And I stood up and said, "well what is the difference between heterosexual sex and homosexual sex, I can't think of anything that I've done with men that I have not done with women - as a man and as a woman". So yes, there is definitely a lot of homophobia in the tranny community but I don't know if it affects the majority of transys. And you have to also take into consideration that a lot of transys are not merely attracted to men or to people of the opposite sex if it goes the other way. A lot of transys are bi-sexuals, a lot of transys identify as lesbians, I even know of some FTMs that identify as gay men. And then we have transys having sex with each other of all descriptions, so it all falls in a heap there.

Norrie May Welby, 1997

Welby's description of transgender sexualities 'troubles' Butler's (1990) interpretation of transsexualism as a set of practices that privileges sexuality over gender.¹⁸ Welby's analysis indicates that gender identity may be more crucial than conformity to heterosexual regimes. Transsexuals who have had genital surgery and want to claim homosexual identities disrupt the notion that transsexuality is primarily driven by acceptance to hegemonic norms of heterosexuality. Welby also suggests that changing gender, and having genital surgery, cannot be read as normalisation to heterosexual regulatory regimes because it is more deviant than being homosexual:

I don't know how much it [homophobia] affected my decision to change my anatomy. I always identified as queer and as deviant and accepted that that was OK. So I didn't have a problem identifying as homosexual or as gay or realising that I was sexually deviant, and I didn't think that that would change when I changed gender because, goodness me, that is pretty deviant changing your gender, let alone changing your body and your genitals. If I can be totally honest about it I didn't see that it made me less [deviant] than [before] just because it made me different, so that [decision to have surgery] in a sense wasn't from homophobia, it wasn't from fear of people thinking I was queer or a sexual deviant. Although in a sense it was to escape other people's homophobia. In a sense it was to try to fit in with other people's demands by at least making an attempt to not be a sexual deviant too, but not in terms of my erotic practice, more in terms of the contradictions of gender expression or social expression. People censured me for

¹⁸ Butler's (1990) theory of the performativity of gender destabilizes sexuality. Transgendered people destabilize gender. For Butler transsexual desire for gender reassignment surgery is located in and reinforces the heterosexual imperative. My research suggests that the diversity in gender expression and sexuality within transgendered communities is similar to that encountered in non-transgendered populations (see Chapter Nine). Although Butler provides a more nuanced discussion of transsexualism and gender reassignment surgery in her 1993 work, her 1990 comments lend academic credibility to negative public stereotypes about transsexuals which continue to impact on the lives and self-esteem of transgendered people.

appearing to be male and behaving female or dressing male and behaving female or dressing female [and behaving male].

Norrie May Welby, 1997

Contradictions in gender expression disrupt the field in which gender relations are constituted. Welby's narrative illustrates how actors are defined by sets of understandings about sex, gender and sexuality that are at work within the social field. Performances of gender that are not culturally intelligible, such 'a person appearing to be male and behaving female' disrupt the *habitus* drawing attention to the way that norms are incorporated in the body and reproduced in everyday social action. Welby's decision to change his/her gender because s/he experienced negative responses to his/her contradictory gender expressions illustrates the way that *habitus* and field are constantly in play in social interaction.

***Habitus*, performativity and the social field**

This chapter has provided an analysis of the way that sex, gender and heterosexuality are troubled in Welby's stage show 'What Makes a Man?' Welby's transgressive performance of gender is made possible by the creation of the space in which the piece is located. His/her performance is also dependent upon having a physical body that is both/neither male and female, masculine and feminine. His/her ambiguous body enables him/her to trouble the social field in which public narratives about male and female, masculinity and femininity are codified and reproduced in routinised bodily practices. Bourdieu (1990: 56) writes 'the *habitus* – embodied history, internalised as second nature and so forgotten as history – is the active presence of the whole past of which it is the product'. In the stage performance Welby draws attention to this embodied forgotten history by the way that gender is actively achieved both in forms of signification and through bodily practices. Corporeality is used to demonstrate the interchangeability of sex and gender. In doing so, s/he indicates that these concepts are not mutually exclusive, ahistorical or natural. The body acts as the conduit between male and female, masculinity and femininity, problematising both essentialist understandings of identity that are located in the body and social constructionist understandings of identity as discursively produced.

Transgender performances traverse the agendas addressed by both Bourdieu and Butler. Similarities between *habitus* and essentialist ideas about identity within feminist theory may be identified in the way that social practices are naturalised in the body and

in belief. For both Bourdieu and Butler, these naturalised distinctions are cultural constructions. Bodily practices insititutionalised as naturalised difference through the *habitus* are disrupted by performances that are unauthorised by normative conventions of action. In everyday life, as well as on stage, Welby represents gender as a process of doing and becoming sustained through an illusion of connection between anatomy and social gender. When these lines of connection are disrupted the *habitus* is exposed and gender is represented as an imitation of an imitation. Welby talks about the way that gendered subject positions are made available to him/her through how other people interpret his/her corporeality, dress and body movements. Welby's stage show and performances of gender in everyday situations simultaneously embody traces of the unruly associated with incoherent gender identities and the normative associated with conventional gender identities. This is because transgender performance is already encoded in a system of signification. Welby's transgressive performance reworks perceptions about gender within the social field in order to expose the social scripts by which coherent performances of gender are legitimated.

Welby's narratives about sex, gender and sexuality are critical and reflexive involving post-structuralist understandings of subjectivity as partial, unstable and contested. At the same time his/her experience of gender is shaped by complex historical, social and political process in which essentialist understandings of identity located in the 'natural' pre-discursive body and an embodied choosing Enlightenment subject are at play. Welby's initial decision to have genital surgery, his/her talk about going back to a gender free pre-existing self, not identifying with a fixed gender and his/her reinvention of self as 'spanssexual' are discursive practices that may be identified with the autonomous choosing subject of Enlightenment theory. These agentic narratives are formulated in and through the interaction between his/her corporeality, identity and context. As such, Welby's talk provides a unique opportunity to explore the inter-relationships between *habitus*, field and performativity.

The use of ideas that broadly correspond to social constructionist and essentialist understandings of identity in Welby's narrative illustrate that conceptualisations of the subject as either a post-structuralist subject wholly constituted in language (Davies, 1990, 1997; Jones, 1997), or an essentialist subject that is based on prediscursive

understandings about self, are ultimately untenable.¹⁹ Welby is a subject that is constituted in and through language and embodiment. Analysis of his/her performance and his/her life story entails attention to the strategic use of essentialism in post-structuralist accounts of identity. The both/andness of subjectivity and agency needs to be reflected in social theory. These issues are taken up in relation to debates surrounding liberal humanist and post-structuralist theories of action discussed in the following chapter of the thesis.

¹⁹ Anne Game (1990: 148-185) crafts a similar argument in relation to how the rural and urban binary is constructed through complex intersections between the two terms.

Storied social action

Agency and the local achievement of identities

What is agency? What does it mean to be a subject with agency? How are agents constructed in contemporary social theories about cultural practices? These basic sociological questions inform the analysis of agency advanced in this chapter. I argue that theoretical understandings about agency have fundamental implications for how sociologists interpret information and construct informants in sociological research. A range of narratives about action and identity that may be identified with essentialist, liberal humanist and post-structuralist theories are now available in non-academic communities. I am interested in how the people to whom I spoke draw on and utilise these contemporary social theories of agency and identity in research conversations about transitioning across binary gender categories. In this chapter I argue that transgendered people have heterogeneous sexed identities that are inconsistent and discontinuous. These ideas are illustrated through attention to the way that transgendered people present themselves as unitary and consistently gendered subjects while also operating with multiple gendered and shifting identities.

One reading of people who engage in elective surgical alteration of the body is that they attach considerable authority to conventional discourses about bodies and identities, masculinity and femininity. Women who engage in cosmetic surgery, for example, demonstrate corporeal dedication to conventional discourses about femininity. Similarly, people who use gender reassignment technologies conform to normalising discourses about the relationship between gender and anatomy. At the same time, elective surgical alteration of the body is a radically unconventional act that goes against dominant understandings of bodies and selves as 'natural'. The people whose experiences embody this contradiction provide an opportunity for research on and analysis of agency in this chapter.

In traditional social theory, agency is normally characterised as a property of the 'individual' and is understood as the power to act (Connell and Dowsett, 1992: 72; Cussins, 1998: 168). This understanding of agency characterises much of social science and feminist literature associated with cosmetic surgery and gender reassignment technologies (Spitzak, 1988; Morgan, 1991; Davis, 1991, 1993, 1995; Balsamo, 1996; Kaw, 1998; Hausman, 1995; Fausto-Sterling, 1993). This individualisation of agency sits alongside and in tension with the collective agency of groups and/or social movements. This theoretical tension is reflected in connections between agency and structure/individual and society oppositions within sociology, whereby agency and the individual are traditionally aligned in an oppositional relationship to structure and society (Connell and Dowsett 1992: 72). Collective agency is discussed in Chapter Nine. This chapter focuses on the way people construct themselves as agents with the power to act autonomously. At this stage I want to recognise that agency is not just the property of the individual; social action is both individually and collectively produced. The deconstruction of the agency/structure divide is achieved through bringing together an analysis of narrativity and identity.

Social life is storied (Somers, 1994: 613-614; Somers and Gibson, 1994: 38). Shared social narratives, such as those associated with gender, nationality, or sexuality, 'encompass' both the individual and the collective, while personal narratives are defined in relation to the broader public narratives in which they are embedded. Narratives are simultaneously general and specific because they are both individually produced and embedded in shared understandings about social life. Margaret Somers' concept of narrativity¹ incorporates the personal and the collective, effectively deconstructing the individual/society and agency/structure oppositions within sociology. The way in which individuals negotiate everyday encounters, take up particular subject positions and resist others, tends to be assumed in Somers' arguments about narrativity, agency and subjectivity. This chapter seeks to develop a theorisation of narrativity and agency by exploring how people understand themselves as agents and draw on narratives of agency in research conversations. I will argue that people

¹ According to Somers (1994: 618-619) there are four inter-related dimensions of narrativity: ontological or personal narratives, public or cultural narratives, conceptual or theoretical narratives and meta-narratives such as the master narratives of historical explanation including ideas about progress, industrialisation, and the Enlightenment. Somers' concept of narrativity embeds identity, experience, social action and social agency in numerous cross-cutting relational storylines that are particular to a specific time and place. For example, Somers argues that people construct identities, however multiple and changing by locating themselves or by being located in stories or public narratives that shift over time and space. See Chapter Two for a more comprehensive discussion of Somers' concept of narrativity.

who transition across binary gender categories consciously locate themselves, both metaphorically and bodily, in public narratives of sex, gender and sexuality.

Most of the people whom I interviewed had used, or were using, medical technologies to modify their bodies so that they more accurately reflected their desired gender identities. The people who participated in this study also had access to, and were often aware of post-structuralist and transgender theories about identities as multiple, contingent and contradictory. They were knowledgeable about the processes, procedures, benefits and risks associated with gender reassignment technologies. Most were familiar with academic critiques of the medical practices in which they are engaged. Academic and public narratives about medical technologies as beneficial and enabling or as oppressive and controlling were available to them as they moved through the various stages in their transition and as they interacted with the medical professionals associated with each of those stages. In transitioning across binary gender categories, transsexuals have already gone through the process of positioning themselves in relation to these multiple and contradictory discourses. The marginality of transgender people, their experience of maintaining a particular gender identity while occupying a body that is differently sexed, and the attractions of a body in which gender and anatomy are consistent, means that the narratives of transgender people make a rich site for an exploration of agency.

This chapter considers the relationship between agency, corporeality, narrativity, selves and technologies through the local achievement of identities. I understand and use agency as social (White, 1992: 14) as well as personal (Davis, 1991: 33; Connell and Dowsett, 1992: 72; Hausman, 1992: 110). It is embodied or corporeal (Connell, 1995: 61; Emirbayer and Mische, 1998; Williams and Bendelow, 1998: 51); involves simultaneous orientations to past, present and future (Emirbayer and Mische 1998: 9 62) and, is embedded in social relations and processes (Granovetter 1985: 487; Somers 1994: 629). Through attention to the talk of three of those who participated in this study, Jack, Anita and Chelsea, I present a case for more complex analyses of agency and subjectivity that explore how agency, bodies, technologies, discourses/narratives and practices are co-implicated in the construction of identity.

Stories, actions, identities

In Chapter Two I argued that stories and identities emerge from interaction, shifting and changing according to the spaces and times in which they are embedded. I used Bronwyn Davies and Rom Harre's (1990, 1999) work to illustrate the way that subjectivities are generated in and through conversations which 'position' people in social encounters. It is the active and embodied constitution and reconstitution of identities in social interaction, and through the use of medical technologies, that is of interest in this chapter. Davies and Harre (1990, 1999) explore the way in which individual identities are dynamically constituted and reconstituted in everyday social encounters through access to a limited range of subject positions that are made available to participants in conversational story-lines which are collaboratively produced. The complexity of an individual's relationship to social life may be captured through recognition of the way in which individual identities are made up of multiple selves, each of which is crafted in relation to shared narratives which are context specific. The contextual nature of identity means that selfhood is experienced by individuals as both historically continuous and as multiple and fragmentary. According to this analysis, the isolated and singular character of selfhood implied by the term 'identity' is abandoned in favour of discourses about multiple selves and intersubjectivity which foreground the active, fluid, contingent and social nature of individual identities.

Identities emerge from error, 'action and counteraction' (White, 1992: 13); they are shaped by contingent responses to events and are accompanied by stories which help create sufficient uncertainties for fresh action. Stories act as both resources for identity claims and as constraints on identity (White, 1992: 13). Action is "temporally" situated in social life; actors' responses to unfolding events are shaped by past experiences and by a future imagined as the consequence of a particular course of action. (Emirbayer and Mische, 1998: 692). These courses of action provide the resources or possibilities for new forms of action, which in turn become the basis for new identities (White, 1992: 14). Decisions about sex reassignment surgery, for example, may be made in relation to a desire for a future identity in which anatomical and social identities are consistent. The relationship between subjectivity and action identified in White's analysis suggests that agency is key to the production of identity (White, 1992; Somers, 1994: 618; Somers and Gibson, 1994: 61).

Perceived discontinuities between the anatomical bodies and social identities of transgendered people illustrate how the experience of agency is embedded in the relationship between corporeality and discourses about male and female, masculinity and femininity. The meta-narratives (Somers, 1994: 619) through which we all craft our identities, those of class, gender, sexuality and ethnicity for example, are inscribed by and in turn ascribe a particular corporeality (Goffman, 1997 [1977]; Bourdieu, 1977; Bartky, 1988; Bordo, 1993a, 1993c). Pierre Bourdieu (1977: 93-94) argues that cultural values associated with maleness and femaleness, class and ethnicity are reproduced in the gestures and movements of the body. These embodied differences are enacted in routine social interaction through the way in which people dress, stand, speak, think and feel.² Susan Bordo (1993a: 186-195) explores the moral, economic, gender and class coding of body shape and size. Bordo argues, for example, that muscularity currently plays an important role in middle-class conceptions of attractiveness; it is associated with self-discipline, control and upward social mobility. Historically muscled bodies have also symbolized:

masculine power as physical strength, frequently operating as a means of coding the “naturalness” of sexual difference... But at the same time... they have been associated with manual labor and proletarian status, and they have been suffused with racial meaning as well (Bordo, 1993a: 193-195).

The body is not neutral; instead it is a surface on which cultural meanings associated with social values, such as age, gender, class, ethnicity and sexuality are inscribed (Grosz: 1994: 141-142). The experience of agency is therefore embedded in a complex set of interrelationships between context, corporeality, identity and narrativity.

Charis Cussins (1998) traces the different forms of agency exercised by women who participate in IVF technologies. When IVF results in a successful pregnancy, Cussins characterises the women as exercising agency by co-operating with doctors in their own medical objectification, maintaining selfhood through interaction during consultations and examinations, and exercising self discipline so as to be seen as a ‘good’ patient. When IVF is unsuccessful, Cussins suggests that the women experience alienation from the technologies and the medical procedures because their orientation to a future identity as a pregnant woman/mother is foreclosed. The experience of agency by research informants is closely related to the identities associated with

² See Chapter Five for a more detailed discussion of Bourdieu’s (1977, 1990) arguments about culturally inscribed bodily dispositions.

parent/non-parent and the existence of meta-narratives which construct stories about bio-medical technologies as enabling or alienating. The stories of empowerment through accepting medical regimes or victimisation where medicine is reframed in terms of discipline and control pre-exist these specific experiences. Thus locality,³ corporeality,⁴ identities, personal narratives about participation in IVF technologies, public narratives about parenthood, and meta-narratives about medicine as either beneficial or oppressive come together in Cussins' analysis of agency.

The relationship between technology and the local achievement of identity is also considered in the analysis presented in this chapter. I look at corporeality, agency, narrativity and identities through research informants' talk about the use of medical technologies for crafting gender. Conversations about crafting identity through the use of medical technologies are also discussions about the medicalisation of sex and gender and the social expectations associated with particular gender identities. The decisions that people with transgendered bodies make about their use of medical technologies produce a conscious, thinking critically reflexive post-structuralist subject through engaging in embodied social action.

Many feminists who write about clients' relationship to, and use of, medical technologies (Spitzack, 1988; Sawicki, 1991; Davis 1991, 1993, 1995; Morgan, 1991; Dull and West, 1991; Sullivan, 2001) tend to use agency unproblematically. For example, Bernice Hausman's (1995: 110 and 118) use of agency is narrowly defined as 'transsexual demand for surgery'. She suggests that her use of agency is not unproblematic - but this is not developed (Hausman, 1995: 110). Kathryn Pauly Morgan (1991: 41-44) urges feminists either to refuse to engage in cosmetic surgery, or to engage in ways that subvert, or parody the ideological foundations of cosmetic surgery. Both of these strategies require an understanding of the individual risks and oppressive contexts associated with elective surgical alteration of the female body. It is clear that a knowledgeable humanist subject underpins Morgan's suggestions for a 'radical' political response to cosmetic surgery.

³ How women experience a particular IVF clinic, whether the clinic had a good atmosphere and the staff were friendly and understanding, was seen as important by many of the women who participated in this study.

⁴ Corporeality in the sense of their bodily functioning and also whether their bodies would co-operate at the cellular level and accept the artificially implanted egg(s).

Sandy Stone outlines the ways in which 'theorists of gender' have denied agency and subjectivity to transsexuals:

Theorists of gender have seen transsexuals as possessing something less than agency. As with "genetic" "women," transsexuals are infantilized, considered too illogical or irresponsible to achieve true subjectivity, or clinically erased by diagnostic criteria; or else, as constructed by some radical feminist theorists, as robots of an insidious and menacing patriarchy... In this construction as well, the transsexuals have been resolutely complicit by failing to develop an effective counterdiscourse (Stone, 1991: 294).

Stone suggests that transsexuals are able to reclaim their agency by writing critical counter-discourses that are located in their embodied experiences of gender and medicalisation. Kathy Davis (1991, 1993, 1995) also appeals to individual agency as a solution to feminist constructions of women who engage in cosmetic surgery as cultural dupes. She argues that women who engage in cosmetic surgery are knowledgeable actors and that feminists need to take their agency seriously. Anne Balsamo (1996: 78) concludes that she is reluctant to view women who engage in cosmetic surgery as simply victims of the technological colonisation of women's bodies. Instead she acknowledges that cosmetic surgery may be a site where 'women consciously act' to rework their bodies in order to craft new 'cultural identities'. There is a tension, however, in these appeals to agency as a solution to the simplistic construction of research informants as cultural dupes, in that Hausman, Stone, Morgan, Davis and Balsamo use agency uncritically.

Agency is not an undisputed or neutral concept; there are ongoing debates within feminist philosophy (Davies, 1991, 1997; Jones 1997) and sociology (Giddens, 1984; Granovetter, 1985; Somers, 1994; Emirbayer and Mische, 1998) about how to understand agency. Feminist assumptions about the agency of people who engage in medical technologies need to be examined in the context of these different philosophical debates about agency. They also need to incorporate sociological ideas about the relationship between agency, corporeality, narrativity, selves and technologies outlined above. Integrating different perspectives on agency into research enables a more nuanced analysis of the way that people draw on humanist and post-structuralist understandings of selves, including why they may take up particular subject positions and resist others. I turn now to a summary of recent feminist debates in the area of individual agency and their relevance for my analysis of the agency of

those who transition across gender boundaries. These discussions centre around what may broadly be termed liberal humanist and post-structuralist theories of agency.

Liberal humanist actors

Liberal humanist perspectives suggest that individual agency is achieved through rational, coherent choices made in the context of particular structural constraints, such as financial resources, geographic location, availability of technology, access to information about the risks, side effects and so on. Liberal humanist concepts of agency are premised upon a knowing subject who makes rational choices, and takes responsibility for those choices based on moral imperatives (Davies, 1991: 42-43; Davies, 2000: 166). Underpinning the liberal humanist agentic subject is an understanding of identity as progressive, linear, continuous, unified, rational and coherent⁵ (Ormrod, 1995: 33).

Liberal humanist theories of action and identity are caught within the agency/structure, voluntarism/determinism oppositions within sociology, whereby individual agency and voluntarism (or choice) are traditionally aligned in an oppositional relationship to social structure and determinism (Gatens, 1996; Jones, 1997). Mark Granovetter (1985) is critical of the atomised actor embedded in the voluntarist/determinist, agency/structure debates that pervade the social sciences. In the following discussion of Granovetter's arguments voluntarism is represented by the 'under-socialised' actor and determinism is represented by the 'over-socialised' actor.

Granovetter's (1985) arguments about under- and over-socialised accounts of economic action are instructive for an analysis of the construction of transsexuals in much of the academic and medical literature surrounding gender reassignment surgery. The construction of transsexuals as subjects who engineer themselves (Billings and Urban, 1982; Hausman, 1995: 129) may be interpreted as an under-socialised

⁵ Ormrod (1995: 33) argues that in conventional sociology, such as that offered by Parsons or Giddens 'the agent is defined as a unitary, rational, knowledgeable, conscious, pre-given entity'. More recently sociologists Emirbayer and Mische (1998: 962) have reconceptualised 'agency as a temporally embedded process of social engagement, informed by the past (in its "iterational" or habitual aspect) but also oriented toward the future (as a "projective" capacity to imagine alternative possibilities) and toward the present (as a "practical-evaluative" capacity to contextualise past habits and future projects within the contingencies of the moment)'. Following Granovetter (1985), Emirbayer and Mische (1998) develop an understanding of agency that situates the actions of individuals with an established history of social relations that are continuously constructed and reconstructed in social interaction.

account of action. According to this interpretation transgendered individuals are constructed as atomized actors who make self-interested choices that are minimally influenced by either gender relations or social structure(s). Similarly, constructions of transsexuals as cultural dupes of the binary sex/gender system (King, 1987; Bornstein, 1994) and/or heterosexual regulatory regimes (Butler, 1990; Lienert, 1995), or as having an under-developed or 'inappropriate' gender identity (DSM-IV, 1994) are over-socialised accounts of action. In this account, social structural factors, such as gender roles and/or gender attributes, are internalised to the extent that they determine action. 'Social influences are contained inside an individual's head, so in actual decision situations, he or she can be as atomized' (Granovetter, 1985: 486) as the self interested individual in the under-socialised account of action.

In both under-socialised and over-socialised accounts of action the problem of order is resolved by the construction of individuals as atomized actors abstracted from their immediate social context (Granovetter, 1985: 485). Both accounts are underpinned by an under-socialised account of action; individual decision making processes are abstracted from the messy materialities of everyday interaction. The specificities of individuals' relationships to others, involvement in decision making groups or histories of interaction are 'relegated to a minor role in the overall conceptual scheme' (Granovetter, 1985: 486). Referring to the construction of agency within classical and neo-classical economic theory Granovetter argues that:

[a]ctors do not behave or decide as atoms outside a social context, nor do they adhere slavishly to a script written for them by the particular intersection of social categories that they happen to occupy. Their attempts at purposive action are instead embedded in concrete, ongoing systems of social relations (Granovetter, 1985: 487).

Granovetter (1985: 485-486) argues for a middle ground position that situates the actions of individuals within an established history of social relations that are continuously constructed and reconstructed during 'routine' interaction. My approach to the analysis of transgendered lives similarly attends to the actions of individuals in the context of social networks and the circulation of knowledges about medical technologies and gate-keeping strategies of health professionals. In this view culture shapes and is shaped by the actions of its members. As Granovetter suggests, access to the contradictions and ambiguities associated with agency requires attention to the messy materialities of everyday interaction.

Under- and over- socialised accounts of action are also present in some of the narratives of people interviewed for this research project. Jack, a tranny boy, critically reflects on the way gender is not actively chosen, but is instead enacted as habit. He equates the taken-for-grantedness of gender, among people who do not have gender identity issues, to having a poorly developed sense of gender:

Once gender is socialised into your brain you don't even have to think about it. It becomes habit. So to me that says that gender is poorly developed. You have not developed anything for yourself, you have just gone along for the ride.

Jack, FTM, 1996

One reading of Jack's narrative is that he provides an over-socialised account for the acquisition, and performance, of gender among non-transgendered people. Gender is internalised to such an extent that it determines action. For Jack, gender is contained within the person's head, the individual is abstracted from his or her immediate social context. This represents the atomised actor in the under-socialised account of action. Jack's talk implies that for him gender is not 'poorly developed', unlike non-transgendered people, he has not simply 'gone along for the ride'. Instead he makes choices regarding his gender identity that are minimally influenced by conventional gender relations or social structures - it is non-transgendered people who are the cultural dupes. Jack takes a reflexive stance on the over-socialised actions of non-transgendered people. At the same time Jack's account of his own actions draws on an under-socialised account of agency.

Similarly, in the following interview extract transgender performance artist Norrie May Welby suggests that women who engage in cosmetic surgery, and people who have or desire gender reassignment surgery, are simply responding to dominant cultural representations about masculinity and femininity:

SP: Cosmetic surgery, you have already opened this up to some extent. Do you think people who have, or desire, gender reassignment surgery differ from people who have, or desire, cosmetic surgery?

Not in quality, only in degree. They are having surgery to fit in with some set image that they have of themselves. Some set image which is always been given to them by other people in society, from magazines and whatever.

Norrie May Welby, 1997

My reading of Welby's narrative is that s/he provides an over-socialised account of why people may choose to surgically alter their bodies. Public narratives about gender and sexual difference, encountered in the media and in the expectations of other people, are internalised to such an extent that they determine action. Individual relationships to others, their personal histories and their experience of the everyday world is of minimal importance in their decision making processes. Welby suggests that there is no qualitative difference between other forms of cosmetic surgery and sex reassignment surgery. However his/her use of "degree" in the context of this extract does suggest that sex reassignment surgery is a more radical form of cosmetic surgery.

Analyses of action that go beyond under- and over-socialised accounts of agency take into account the everyday experiences of individuals, as the complexities of their relationships to others, contingent circumstances, life stories and public narratives interact. This view, for example, situates individual decisions to use gender reassignment technologies within the ongoing social contexts that frame their experiences of being transgendered. Post-structuralist approaches which focus on the fluidity and multiplicity of identities are able to capture the dynamic aspects of social action. It is to a discussion of post-structuralist theories of subjectivity and agency that underpin post-structuralist accounts of action and identity that I now turn.

Post-structuralist perspectives

According to post-structuralist perspectives subjectivity is provided through subject positions which are made available to individuals through a variety of discourses. Individuals simultaneously constitute themselves and are constituted in discourse. However, we are not free to take up, or choose, subject positions at will as we can only make choices 'within the terms of available discourses' (Davies, 1991: 42). Therefore, post-structuralist perspectives suggest that, because individuals are subject to discourse, human agency is 'fundamentally illusory' (Davies, 1991: 46). In other words, individuals are able to choose from only a limited repertoire of available narratives, representations, positions or options, suggesting that agency is constrained by this limited choice. In addition, which kinds of narratives or 'choices' will predominate is 'contested politically and will depend in large part on the distribution of power' (Somers, 1994: 630). The limited repertoire of representations and stories means that certain unintelligible experiences, events and identities will not be easily

accommodated within the range of available cultural, public and institutional narratives. Post-structuralist perspectives suggest that the continuity of the subject is experienced through embodiment, the capacity to tell coherent stories about the self that are sequential, and people's material relationship(s) to discourses(s) rather than through a linear or essentialist concept of identity. Underpinning post-structuralist understandings of agency is a post-structuralist understanding of subjectivity as multiple, discontinuous, contingent and contradictory.

Post-structuralist understandings of subjectivity locate the continuity of identity in the relationship between bodies and discourses (Davies, 1991; Jones, 1997). Public narratives about the relationship between personal biography and identity often assume that the sexed body is unchanging. Assumptions about embodied continuity in commonsense understandings of identity are potentially problematic for many transgendered individuals who experience significant discontinuities between their corporeality and their gender identity. In the following narrative Jimmy talks about having an ambiguous gender identity and the way that this 'forces' him to identify as transgender:

I guess right now I identify as, I guess I have to identify as transgender. Like I don't want to, but maybe further down the track I can drop that label in my own mind, and maybe my friends can drop it, and maybe I'll be in a position where it doesn't come up, or it doesn't have to come up, or it doesn't have to stay with me.

Jimmy, FTM, 1996

Jimmy operates with multiple gendered and shifting identities - he has a personal history of living as a woman/girl, he currently identifies as male but accepts his interim transgender identity. Jimmy's ambiguous corporeality is the basis for accepting a transgender, rather than a homogeneous male, identity. The temporal dimensions of agency are also indicated in the reference to present and future in Jimmy's talk. Jimmy is already anticipating being able to make distinctions between his transitional and post-transitional identities. He suggests that his current transgender identity is not chosen; he looks forward to a time when his body is less ambiguous and he is able to exert more control over his identity - and therefore present himself as a unitary and consistently gendered subject. The contextual nature of identity represented in Jimmy's narrative suggests that Jimmy's experience of selfhood is both historically continuous and multiple and contradictory. This point about the historical dis/continuity of gender identities is also taken up in another interview with Chelsea, a MTF:

I guess the bottom line is, me as a person is the sum total of everybody that I have been in the past, so that I can't deny my past and say I should have done this (transition) earlier because I would not be here right now without being that person, without being those steps on the pathway.

Chelsea, MTF, 1996

Chelsea's narrative indicates that identities are historical, relational and corporeal. Rather than presenting herself as a unitary and consistently gendered person, Chelsea characterises her identity as multiple and discontinuous. Continuity in this narrative is constructed through the metaphor of a 'pathway', which represents her journey through life. Research informants who use liberal humanist understandings of the self, which emphasise essentialist and unitary identities, problematise post-structuralist constructions of agency and subjectivity which do not take into account how identities are lived and experienced. Alison Jones (1997: 268) for example, draws on a disembodied and over-socialised actor when she argues that identities are shaped through and by the culturally specific meanings associated with the particular structural categories (gender, class, sexuality, race, occupation) that a person happens to occupy. As a result '(t)he real embodied individual is largely irrelevant to the performance' (Jones, 1997: 268).

Liberal humanist and post-structuralist theories of identity may be further complicated by research informants who draw on both in constructing stories about themselves as men, women and/or transgendered. To illustrate this point, transgendered research informants who participated in this research often drew on essentialist understandings about their gendered selves, presenting themselves as unitary and consistently gendered subjects with agency. At the same time, they inhabited bodies that they acted on as subjects *and* they operated with multiple gendered and shifting identities. Transgendered research informants offer distinctions between their pre-transitional and post-transitional identities. Their bodies and identities were not therefore unchanging but multiple, inconsistent and discontinuous - depending on time and context.

Bronwyn Davies (1991: 42) attempts to unhook agency from its liberal humanist origins and reinvent it in terms of feminist post-structuralism. Davies redefines agency as 'lying in the inscription of some forms of humanist self, and more significantly, as lying in the reflexive awareness of the constitutive power of language that becomes

possible through post-structuralist theory' (Davies, 1997: 272). Or to put it another way, individuals achieve a sense of agency through humanist discourses that constitute subjects as active agents. According to this perspective individuals are not 'essentially' agents but only agents in so far as they are constituted, and constitute themselves, as agents through access to stories about agency that arise out of liberal humanist discourses. A post-structuralist agentic subject is aware of the linguistic processes through which agency and subjectivity are constituted and reconstituted. Post-structuralist theory is used to deconstruct, disrupt or subvert linguistic processes through which human beings constitute themselves as subjects, the most important of which are binary oppositions constituting male and female subjects. Davies (1991: 1992: 57-58) outlines this project explicitly in this way:

To think of agency while the male/female dualism is intact is to think, inevitably, in terms of male, other-than-female... To conceive of agency once the male/female dualism is abandoned is to think of speaking subjects aware of the different ways in which they are made subject, who take up the act of authorship, of speaking and writing in ways that are disruptive of current discourses, that invert, invent and break old bonds, that create new subject positions that do not take their meaning from the genitalia (and what they have come to signify)... (Davies, 1991: 50).

To understand male and female in terms of a binary opposition, whereby masculinity and femininity are positioned as opposites in a hierarchical relationship, is 'to concentrate on the fixity and continuity of gender relations' (Ormrod, 1995: 34). Post-structuralist analysis suggests that male and female, masculinity and femininity are not fixed essences or unchanging features that belong exclusively to men or to women. The alternative is to see male and female, masculinity and femininity as a product of a complex set of interactions between discourses, or ways of constituting knowledge (Weedon, 1987: 108), social practices and contested relations of power between socially constituted sexes and genders (Bourdieu, 1977: 93; 1990: 58). Once the male/female dualism is deconstructed then it becomes possible to explore how gendered subjectivities are produced through positions in discourse. Post-structuralist understandings of subjectivity allow for an exploration of how identities are crafted through multiple subject positions. They offer a more theoretically sophisticated understanding of social change, and they allow for the possibility that new discourses, and therefore, new subject positions (read different relations of power between the sexes) may emerge over time (Davies, 1992: 58; 1993: ix-x). Gender then is not a descriptive category; rather it is a performative construct that is produced and

reproduced in the everyday interactions of individuals, as personal narratives, chance events and public stories interact (Butler, 1990, 1993; Bourdieu, 1990).

Liberal humanist understandings of agency are resisted in post-structuralist accounts of subjectivity; agency is refigured as an ability to recognise the ways in which subjects are positioned in relation to particular discourses and practices (Davies, 1991: 47). Political action, according to the post-structuralist perspective, involves developing new discourses or writing counter-narratives which provide new possibilities for constituting our social identities and for locating ourselves in social relations (Somers, 1994: 630-331). The post-structuralist subject speaks or is spoken, writes or is written into existence. However, emphasis on the speaking/writing/reading subject in post-structuralist accounts of agency assumes an ability, or a willingness, to speak and/or write and/or read. For Davies (1991: 52; 1993: xviii) the post-structuralist agentic subject is one who possesses particular authoritative knowledges about the relationship between discourse and subjectivity:

To be feminist, and a feminist theorist is itself to engage in the very act of choosing to speak, of discovering the possibility of authority and using that speaking, that authority, to bring about fundamental changes in the possible ways of being that are available to oneself and others (Davies, 1991: 52).

How is this knowing, choosing post-structuralist subject substantially different from liberal humanist concepts of agency which focus on rational choice or essentialist understandings of subjectivity? Perhaps, as Davies suggests, there is a degree of continuity between humanist and post-structuralist understandings of subjectivity and agency despite attempts to construct them as mutually exclusive positions.⁶

A second, and related observation, is that the ways in which subjects take up particular subject positions, and resist others, are under-theorised in post-structuralist accounts of both subjectivity and agency. Alison Jones' discussion of how individuals are actively constituted as subjects, appears to reflect this lack of attention to the actual

⁶ Alison Jones (1997) attempts to construct a distinction between liberal humanist and post-structuralist positions on agency. She (1997: 265) notes that it is in the areas of individual agency and social change that post-structuralist theory sometimes struggles to maintain a clear distinction between the humanist and the post-structuralist subject. Social change is achieved through the productive possibilities afforded by the multiple meanings through which post-structuralist subjects are produced. Drawing on Davies' work as an example of how liberal humanist understandings of choice may be read (mistakenly) into post-structuralist theories, Jones suggests that the individual who 'takes up' the different subject positions made available within discourse is 'both a constituted subject and a choosing one too' (Jones, 1997: 266).

doing (and undoing) of identities in post-structuralist theory more generally. People who transition across gender offer accounts about their lives that are shaped by the discourses with which they are most familiar. In the following narrative, for example, Chelsea suggests that both medical discourses about 'gender dysphoria' and public narratives about sexual difference draw on sets of social understandings about the relationship between gender and anatomy:

I would say that gender dysphoria is a problem of having the wrong gender [in relation] to your body. It has to be a social issue too because it is how society sees those genders as applying to your body. That doesn't change the fact that I still want it [sex reassignment surgery], and even in a world where we didn't have that problem I would still want my body changed. Because I still have a body image and that body image is separate from the society pressures...

Chelsea, MTF, 1996

These comments suggest that Chelsea is aware of how she is constituted as different through medical discourses (referring to 'gender dysphoria' and 'having the wrong gender in relation to your body') and in public narratives about the relationship between gender and corporeality. My interpretation of this narrative is that Chelsea indicates that the body is represented as a surface on which social meanings about gender are inscribed ('It has to be a social issue too because it is how society sees those genders as applying to your body'). At the same time Chelsea is actively engaged in constructing her identity through the use of gendered technologies of the body in general and surgical interventions in particular ('I still want my body changed'). When research informants constitute themselves as the authors of their lives, they demonstrate the way they use liberal humanist discourses and public narratives in their understandings of identity, choice and action.

People now have available to them post-structuralist understandings of selves as multiple, contradictory and contingent. As a result, they may offer stories that draw on liberal humanist and/or post-structuralist discourses in different contexts. These shifts and contradictions in the narrative construction of identity may be found in the stories of the people that I interviewed. In the previous chapter, for example, Norrie May Welby's stage performance, and her talk about gendered bodies, indicates that s/he is consciously negotiating the doing and undoing of identities. In this regard his/her talk and actions are consistent with post-structuralist theories about identities as situated, constructed and contingent. At the same time, s/he draws on an essentialist notion of identity that is located *in* the 'natural' pre-discursive self which is either non-gendered or

multi-gendered or both. In this latter narrative, Welby embraces a form of biological essentialism that is based on the construction of the body that exists prior to gendered socialisation. Welby is aware that s/he is positioned as a gendered subject in interaction and through narratives and forms of representation and s/he presents him/her –self as an embodied choosing (liberal humanist) subject.

Liberal humanist understandings about choice and post-structuralist ideas about identities as multiple, shifting and contingent are consistent with Jack's narrative about gender reassignment technologies. In the following narrative Jack acknowledges the risky and experimental aspects of FTM surgery and he talks about the dynamics of being negatively positioned in conversations with medical professionals:

I'm quite resigned to the way my genitals are, but that is for a couple of reasons, I know that the surgery available is not great at all. I know that the doctor who performs it is not real happy about performing it, and does not listen to anything that you have got to say anyway - well that is the indication that I get, I could be wrong with that. But why should I do that to myself? And as much as I do want a dick, you know I can rationalise so much why I should have it, but the older I get the more I say is it really worth it?

Jack, FTM, 1996

Jack indicates that female-to-male transsexuals are not positioned in relation to medical technologies in the same way as male-to-female transsexuals. Rather than colluding with the medical profession and encouraging a therapeutic response from clinicians (Hausman, 1995: 128-130), Jack indicates that he felt excluded, or marginalised, by the surgeon involved with his case. Jack's indecision about sex reassignment surgery, and criticism of the medical technology, is consistent with a liberal humanist understandings of agency where choice is constructed as the property of the individual understood as the power to act. In this interview Jack also talks about having to apologise to a clinician after the doctor took offence at Jack's suggestion that medicine was 'a patriarchal profession'. Jack brings a feminist critique of the medical profession to his experiences in the clinical setting and in doing so implies that his relationship with some of the medical specialists associated with his case was at times tense. His talk also suggests that, in his interactions with the medical specialists, he felt that he was occasionally positioned as a woman. These narratives and positions are available to Jack because he has lived as a woman. Harrison White (1992) argues that identities become salient when individuals encounter inconsistencies between narrative constructions of self and the social contexts in which they act. The way that Jack

negotiates this encounter, and takes up a particular subject position as a feminist in order to resist the inferior one that is made available to him by the medical specialist, is illustrative of White's point about the dynamic constitution of identity.

Previously in this chapter I suggested that there is a tendency in feminist analyses of medical technologies to construct individuals who choose to surgically modify their bodies as cultural dupes. In the clinical setting Jack encounters inconsistencies between his social identity as male and his perception of how he is gendered female and marginalised by the medical specialist. Jack attempts to maintain control in this situation and to assert selfhood through indicating knowledgeability about feminist critiques of the medical profession - thereby positioning himself as a person with agency and as a female in this interaction. Post-structuralist constructions of agency sometimes characterise individuals as agents who are not reflexively aware of the discursive processes through which agency is constituted. For Jones, it is the expert theorists who knowledgeably foreground language and meaning as they 'wrestle to speak' (Jones, 1997: 263) about the post-structuralist subject who comes into existence in and through discourse. She argues that some inexperienced students [and presumably those members of the general public who are also unfamiliar with post-structuralist theory] misrecognise the way that the acting, choosing, unitary liberal humanist subject is constituted/produced as such through language and discourse (Jones, 1997: 263-266).

Donna Haraway (1991: 198) notes that agency transforms the entire project of producing social theory and argues that acknowledging the agency of research informants is the only way to avoid 'false knowledges' in the human sciences. For Haraway incorporating the agency of research informants into theorising is one way of ensuring that feminist theories remain relevant to the everyday world. Haraway does not however, consider how the agency of research informants is to be understood. In my earlier work on elective breast surgery I emphasised the agency and knowledgeability of women who engaged in cosmetic surgery. Agency was deployed as a critique of feminist analyses of cosmetic surgery that implicitly constructed women as 'victims' or 'cultural dupes' of the cosmetic surgery establishment (Phibbs, 1994). Negative feminist analyses of women who engage in cosmetic surgery and theoretical debates surrounding humanist and post-structuralist approaches to agency also tend to simplify the way choices are made by individuals, and in doing so, to homogenise their experiences. Anne Game (1991: 6-7), for example, argues that the emphasis on the

knowing subject in classical sociology has meant that individual desire for agency has largely been under-theorised. My research suggests that there are continuities between contemporary post-structuralist social theories of agency and the way in which clients attempt to recraft their identities through the use of medical technologies.

In my earlier work on cosmetic surgery the women I spoke to were aware of the ways in which they were constituted in and through discourses about beauty, youth and femininity. Transsexual subjects also talked about having to conform to binary notions of gender in order to get by in the world. In other words, research informants recognised that they lived in a world that was discursively produced and they presented themselves as strategic actors within it. The deeply embodied nature of surgical modification, combined with feminist analyses that construct it as a problematic practice, suggest that contemporary theories about agency must be held in tension with how choices are made, and explained, by individual actors. A more complex analysis of agency and subjectivity is needed, one that explores how corporeality as well as discourses and practices, are co-implicated in the construction of identity by research informants. This complexity may be seen in the words of individuals who use medical technologies to craft their gender identities. Chapter Four, for example, considered how Robyn employed his/her 'problematic' body, medical discourses and medical technologies to craft his/her identity initially as male and later as female. In the following section I explore the place of corporeal diversity within post-structuralist theories which focus on the discursive production of bodies, actions and identities.

Embodied action and corporeal identities

Feminist attention to corporeal diversity is yet to be adequately represented in some sociological theories of agency. There are many good examples of post-structuralist writing that pay attention to corporeal diversity (See for example Davies, 2000; Williams and Bendelow, 1998; Robillard, 1996; Shildrick and Price, 1996; Williams, 1996; Frank, 1991, 1995, 1996; Sobchack, 1995). While some sociologists pay attention to bodies (see Connell, 1995; Frank, 1996), this position is different from other sociologists who do not explore in detail how corporeality may impact on action (see Emirbayer and Goodwin, 1994; Emirbayer and Mische, 1998). A lack of attention to the relationship between embodiment, identity and action, as well as to the corporeal limits of some bodies, is evident in Emirbayer and Goodwin's (1994) discussion of agency. Emirbayer and Goodwin argue, for example, that human agency ...

entails the capacity of socially embedded actors to appropriate, reproduce, and, potentially, to innovate upon received cultural categories and conditions of action in accordance with their personal and collective ideals, interests and commitments (Emirbayer and Goodwin, 1994, 1443).

In this under-socialised account, agency is a disembodied phenomenon. Access to the contradictions and ambiguities associated with theories of agency necessitates attention to the messy materialities of bodies. This requires recognition of embodied diversity rather than an implicit assumption of a universal and transcendent body.

Sociologist Bob Connell (1995: 60) adopts a more controversial position about the relationship between agency and embodied differences, one that explores 'the activity, literally the agency of the bodies in social processes'. Or to put it another way, Connell asks that we take into account how embodied experience interacts with discourse, meaning and subjectivity to frame individual actions. In Chapter Four I discussed the way Robyn's understandings about and experience of her changing body impacted on her sense of self and the choices that she was able to make regarding her gender identity.⁷ Arthur Frank (1996: 58) also argues that bodies are not simply positions in discourse or the product of social practices. For Frank it is only through bodily located knowledges, or individuals' experiences of the interaction between their flesh, forms of inscription and their intentions, that bodies come to have personal significance and meaning. In Chapter Seven I argue that identities are the outcome of a complex interaction between corporeality, culture and subjectivity. Transgender identities are managed in the context of occupying bodies that confound conventional discourses associated with sexual difference. The liminality of people who identify as transsexual or transgendered allows them to reflect on the relationship between gender identity, corporeality and medical technologies. I look at the contradictions and ambiguities associated with transgender embodiment through research informants' narratives about the relationship between identity, corporeality and gender reassignment technologies.

Recent theoretical debates in sociology (Granovetter 1985; Emirbayer and Mische, 1998: 962) and feminist philosophy (Davies, 1991, 1997; Jones, 1997) surrounding

⁷ Actor-Network Theory considers the relationship between humans and nonhumans. It ascribes agency to artifacts in so far as they influence or force changes in human behaviour and/or social relations (Law, 1992; Latour, 1992, 1999). In Robyn's case cells, hormones and body parts force changes in Robyn's gender identity.

agency address how understandings about embodied social action are produced. This involves recognising that public narratives about choice and action are socially produced. Similarly, 'agency' is a sociological construct and not something that is outside of discourse. Only a minority of people elect to permanently transition across binary gender categories or to surgically reconstruct their bodies, often in the face of resistance from others. Consequently the way they present themselves as people with the power to act, by drawing on discourses that may be identified with liberal humanist understandings of choice, is of particular relevance to sociological understandings of agency. In conversations with people who engage in these practices, informants often presented themselves as knowledgeable and informed people rather than those with limited awareness of the consequences of their decisions or arguments against the course of action that they had taken. In the next section I look at narratives of research informants as examples of the way that agency is social (White, 1992) as well as personal (Davis, 1991; Hausman, 1992). I provide examples of narratives about identity that involve simultaneous orientations to past, present and future (Emirbayer and Mische, 1998) and that recognise the messy materialities of everyday interaction.

The agency, corporeality, action interface

I suggested above that agency is tied to action, identity, corporeality and experience. The complexities associated with agency may be seen in the narratives of some of the people who participated in this research. This section explores the way research participants combine experience of their bodies, discourses of sexuality and gender, and knowledge about the pain and risks involved in surgery in order to construct themselves as agents or people with the power to act. In the following narrative Jack talks about his experience of inconsistencies between his narrative construction of self and his corporeality. Jack begins by talking about the way identity is collaboratively produced through relationships to others in a particular (work) setting (Kondo, 1990). He then goes on to talk about the difficulties FTMs encounter doing masculinity/sexuality in the bedroom:

I don't run around everyday saying all the time "hey I'm a transsexual male, I'm a female to male transsexual". So on the one hand, by not admitting my tranny stuff I'm just living my life as a man, that is what everyone that I work with thinks, that is what everyone I meet and work with thinks, I mean I don't see why I need to. I mean I know who I am, I know what I have done with my life, I'm not a professional transsexual. But it is still an essence, it is still part of you. You will always be transitioning until the day you die, because there is always

something that is happening to you, whether it be another shot in the backside every two weeks, or whether it be a (hormonal) implant every six months or whatever. When you look down and find that six inch dick that you dream of is only one or two inches long, or when the one that you take to bed is made of rubber and you put it in the drawer at the end of the night. So one way or another, if you are still doing hormones or you are still pre-surgical in some senses, you will always be transitioning. But to my way of thinking, once you have got passed a certain point you are a man, well yeah I'm a tranny that is sort of secondary, the primary thing is you are a male.

Jack, FTM, 1996

The personal and social nature of identity is indicated in both the concealment engaged in the public world of work and the vulnerability involved in the very private and intimate world of love-making. In the world of work identities are unproblematically constructed through public narratives about sexual difference which assume continuity between anatomy and social gender. Jack's body is sufficiently masculine, and his performance of masculinity convincing enough, so that he is able to pass in both at work. In the bedroom Jack's identity as a man is disrupted by his lack of a penis. In intimate situations Jack feels that his body does not allow him to pass convincingly as a male lover. In this narrative, the body acts as both a resource and as a constraint on identity. Jack's identity does not have an unproblematic continuity: in certain contexts he is comfortably male, in others he is uncomfortably other. For Jack the control or certainty over his identity that he thinks a penis would provide him with makes surgery an attractive option for the future – despite his reservations about the risks associated with the procedure.

In this interview, Jack's talk draws on multiple and contradictory subject positions; he explains his identity in the medical setting, and in intimate situations, as that of a male with female genitalia. Secrecy and disclosure are determined according to shifting contexts. Among his network of personal friends, among other transsexuals and in the interview with me, Jack identifies as a FTM. At work he is male and secretive about his transsexualism. Jack has a partner who identifies as a lesbian. As a result of this relationship he continues to maintain a network of friends within his local lesbian community. He is saddened by the fact that, despite years of service in this community, he is sometimes marked problematically as a straight man, a position that Jack interprets as a challenge to his membership. Having a girlfriend means that in public Jack finds himself unmarked as a 'straight man'. Jack comments on the novelty of being unmarked in public space and he finds this situation to be somewhat ironic given his

personal history and politics. Jack resists the way others position him as 'straight' and therefore 'conventional' within the lesbian community, but accepts this positioning by his work colleagues and the general public. It is not hard to imagine that negotiating these different contexts, and maintaining continuity/credibility in the presentation of his gender identity, requires a good memory, considerable skill and capacities for performance. While Jack's management of his identities enhances his sense of the fragile and embodied nature of agency, he is also self-conscious about his power to act – he is acutely aware that he might act differently.

Davis and Harre (1990: 59) argue that liberal humanist and essentialist theories of action and identity are inclined to focus on routinised practices underpinned by an understanding of subjectivity as entirely self produced or pre-discursive, consistent and unitary. Post-structuralist theories tend to explore the contingent and contradictory nature of action and identity (Davies, 1993: xv). They argue that the humanist self is convincingly achieved through the 'ongoing, constitutive force of language' (Davies, 1997: 274). Identity and action are discursively produced and therefore constantly in process. According to post-structuralist perspectives the continuity of the subject and agent within liberal humanism is invented through the production of consistent or non-contradictory story-lines and lived narratives:

The sense of continuity that we have in relation to being a particular person is compounded out of continued embodiment and so of spatio-temporal continuity and shared interpretations of subject positions and the story-lines available within them (Davies and Harre, 1990: 59).

Most people who identify as transsexual or transgendered have had experiences of attempting to craft coherent sexed identities in the context of occupying bodies in which their gender and anatomy are inconsistent. As a result, they sit on the cusp of tensions between these different social theories about action and identity. Or to put it another way, liberal humanist discourses and public narratives that assume consistent and unitary identities are at odds with transgender people's post-structuralist-like accounts of identity which are often experienced as non-unitary (Bloom, 1998), contingent and contradictory. The way in which people who transition across gender draw on and utilise a range of essentialist, liberal humanist and post-structuralist understandings about action and identity in research conversations is instructive for exploring the way that identities are taken up and reproduced in the everyday interactions of individuals, as personal experiences, unfolding events and shared

narratives interact. Jack, for example, currently identifies as a male, in public he has an unambiguously masculine body and yet he has a history of living as a female and of crafting an identity as a woman. For Jack, the continuity of identity is contextually crafted in relation to shifting discourses about maleness, femaleness, masculinity and femininity. Jack's story illustrates how sexed identities may be crafted independently of conventional discourses about the relationship between anatomy and social gender.

In Jack's narrative the continuity of Jack's identity is experienced through his relationship(s) to discourses(s) about corporeality, femaleness, maleness/masculinity, and (hetero)sexuality rather than through a linear or essentialist concept of embodiment or identity. Jack is able to draw on a range of conventionally incompatible identities such as male, female, straight and lesbian. His story is therefore consistent with post-structuralist understandings of subjectivity as multiple, discontinuous, contingent and contradictory. At the same time Jack describes transitioning as 'an essence' because it is an ongoing process for him. In this narrative, essentialism is located in the daily corporeal work associated with maintaining a coherent male identity. Essentialism here is experienced as a verb, a process of doing, rather than as a noun which assumes a stable, coherent and pre-existing being (see Davies and Harre, 1990: 47). The essentialist nature of being transgendered, or being male, in Jack's talk is consistent with a liberal humanist understanding of the self which acknowledges the routineness or consistency of actions associated with identity. For Jack, essence is embodied and actively constructed. This section of Jack's narrative suggests that for some people essentialism is more fluid and contradictory than is acknowledged in feminist debates surrounding humanist and post-structuralist theories about subjectivity.⁸

The different ways that Jack positions himself and is positioned by others in this interview illustrate the complex ways that identities are negotiated in everyday social encounters. Jack's identities are constituted and reconstituted through access to the subject positions which are made available to him in conversations that are collaboratively produced. Jack sometimes resists and sometimes goes along with these

⁸ For a discussion of the fluid and contradictory nature of essentialism see the discussion of Fuss (1989: 1-6) in footnote 22 Chapter Four, and Kirby (1991). Vicki Kirby (1991: 9) suggests, for example, that rethinking essentialism entails looking at how essence is 'installed "as such" and naturalized within our thought and our being'. In relation to transsexualism, see my discussion of essentialism in Elizabeth Grosz's (1994) work (footnote 21, Chapter Four). Also see Chapter Seven for a discussion of the problematic use of essentialism in Hausman's (1995) analysis of transsexualism.

positionings. Jack's story illustrates the way that people are passively positioned in public space. Davies and Harre (1990, 1999) observe that the pre-existing meanings associated with identity categories provide non-verbal contributions to identity. In Jack's narrative, male, female, masculinity, femininity, straight and, gay form part of the personal and cultural resources that other actors draw upon in constructing Jack's identity. In the public arena Jack's appearance, manner, body shape and clothing also provide non-verbal contributions to his identity. People make judgements about Jack's identity by combining this visual information with their historically formed expectations about the sorts of behaviours typically associated with the particular social categories that they identify with Jack. At the same time, discourses and practices of masculinity are resources that Jack uses to craft his identity as 'male'. Convincing performance relies on congruence between Jack's historically acquired knowledges about masculinity and that of his 'public'. The novelty of Jack's situation means that he notices the way that he is positioned by the people that he interacts with and by anonymous others in public space.

Drawing on Nancy Frazer (1990), Davies and Harre argue that an individual's 'experience of gender,... their personal-social identity, can only be expressed and understood through the categories available to them in discourse' (Frazer cited in Davies and Harre, 1990: 45-46). Identities are not necessarily individual - for example professions or communities may have identities - however it is important to note that both group and individual identities are collaboratively produced. That is collective identities have individual 'faces' while individuals craft their identities in relation to the larger identities in which they are embedded - nation, sex, class etc. Harrison White (1992) argues that these categories are not internally coherent because human actions/selves cut across these realms. It is the social dimension of agency, the interaction between the individual, stories and the social context of action that is of interest in White's account.

The contextual nature of identity means that selfhood is experienced by individuals as both historically continuous and as multiple and fragmentary. Anita, a male-to-female transsexual interviewed in 1997, talks about the pleasures and possibilities that sex reassignment offers. For Anita sex reassignment surgery offers the pleasure of seeing her 'self' reflected in her body image, and the possibilities of having a

relationship with a man as a heterosexual woman. At the same time, she suggests that she will still be 'basically the same person' - meaning that, as she is already female, surgery will not change her identity:

I want sex reassignment surgery so I can look in the mirror and see myself reflected back, and so I can have a loving relationship with a male... (But) the surgery itself doesn't change anything, it doesn't mean that all of a sudden all of your problems are gone. Your whole history is still there in your mind, your whole experience, people you have known, you are still basically the same person you were before. For me it is still worthwhile because the ideal is to function sexually as a female, whether or not to be able to because of inadequate vaginal depth is something that is not the issue, as much as having the so called offending limb removed or whatever. I think maybe because it (the penis) is associated with what male is about in our society.

Anita, MTF, 1997

Anita's comments hint at the difficulties associated with maintaining a feminine identity while her anatomical sex and social gender are incongruent. At the same time Anita's observations draw on sets of understandings about the penis/phallus as site and sign of sexual difference, and a symbol of male superiority. One reading of Anita's talk is that her desire for sex reassignment surgery is a form of conformity to binary understandings of sex and gender as well as to heterosexual regulatory regimes (hegemonic conformity/false consciousness). Another is that Anita's distancing from sets of expectations about masculinity is a radical critique of that institution and personal form of resistance to hegemonic masculinity. Yet another reading may be that Anita's actions constitute an undermining of binary understandings of sex and gender as fixed and immutable. The point is that Anita's narrative may be read in a variety of different ways. It is precisely at those critical junctures where struggles over meanings occur for Anita that we find our analytical concepts challenged.

Ken Plummer (1995: 22) argues that the meanings of stories are never fixed but shift in relation to the different spaces and times to which they are linked. The spatial dimensions of stories are discussed in Chapters Two and Nine. This section considers the way that metaphors of time are embedded in stories about action and identities (Massey, 1994; Emirbayer and Mische, 1998). Anita justifies her decision to have gender reassignment surgery in terms of her desire for a future identity in which her anatomical and social identities are consistent ("I can look in the mirror and see myself reflected back"). Surgery provides the resources and possibilities for Anita to imagine a

different future, one in which she constructs herself, and is constructed by her sexual partner, as a heterosexual female. Anita refers to a present in which she experiences her identity as a woman with a penis as fragmented or incomplete. At the same time Anita acknowledges that identities are historically continuous (“you are still basically the same person you were before” [the surgery]), and that post operatively her orientation to the present and the future will still be shaped by her past experiences (“your whole history is still there in your mind”). Anita’s narrative incorporates the active, fluid, contingent and social nature of agency.

Medical technologies provide the resources for Anita to craft a new body and thereby change her embodied relationship to structural narratives about gender and sexuality. Anita refers to her own over-socialised concept of self; she uses medical technologies in order to appear a certain way and to have certain types of penetrative heterosexual encounters. However she also suggests that the presence or absence of a penis is symbolic because her ‘female self’ is not transformed by the surgery. At the same time the female self that seeks the surgery is also a self with memories of life as a male. Anita’s identities are fractured by a lack of continuity between body and mind, past and present. This rupture enables Anita to think about how her identity is constructed in relation to her anatomy and sexuality.

In the following narrative, Chelsea talks about deliberately locating herself in discourses and practices surrounding masculinity and femininity. She is actively engaged in crafting her gender identity and, at the same time, recognises the constructedness of gender in her own practices:

Chelsea: I think ultimately in society gender is arbitrary, and fitting people into an arbitrary pattern you are going to have people who don’t fall into any categories and will fall out of them, or they have to adapt to them, and I guess I am the same. I enjoy being a woman, but I have to work at it, because I have had all this social overlay on me, I have to unlearn what it means to be a man.

SP: So that suggests that what it means to be a man is not natural.

Chelsea: Exactly, what it is to be a man is not the opposite to what it is to be a woman, because there are lots of qualities that fall into both categories... and it is not a one dimensional scale from masculine to feminine.

SP: That raises the point about whether transsexuals are unstable victims of binary gender categories?

Chelsea: Well I think there comes a point where you have to be unstable in order to make change, for the change to take effect and to exist. If you are ultimately very stable and you are happy in your role then you would never make a change. And it is when the pain of staying the way you are exceeds the pain of change that you make that change. I think there comes a point in every transgendered person's life where the pain of staying who you are, and pretending to be what you are, exceeds the pain of making the change. And it varies in each person's life, I began transitioning when I was in my 30s. I wish I began my transition earlier but I didn't because of social constraints. I thought if I began my transition one of two things would happen. I would upset everybody around me and I would be put away in a mental institution and because of that I didn't make my transition until much later.

Chelsea suggests that masculinity and femininity are socially constituted yet also unstable categories ("gender is arbitrary"). Her narrative is consistent with the view that male and female, masculinity and femininity are not fixed essences or unchanging features that belong exclusively to men or women ("there are qualities that fall into both categories"). Similarly, her talk about 'working at' femininity and 'unlearning' masculinity indicates that Chelsea is aware that gender is a performative construct that is produced in the everyday interactions of individuals (Butler, 1990, 1993).

People who transition across binary gender categories draw on and utilise ideas about action that may be identified with humanist theories about agency and identity. Chelsea indicates that an awareness of the negative consequences that may be associated with transitioning across binary gender categories prevented her from following this desired course of action. Her relationships to others, and fears about being portrayed as 'abnormal' and therefore 'mentally ill', acted as constraints on her initial ability to make choices about her gender identity. Chelsea recognises the way that transgender people are positioned as 'other' in relation to discourses and practices that assume continuity between bodies and identities. Early in the interview she refers to her over-socialised male-self in which gender roles and attributes determine action and identity ("staying what you are"; "pretending to be what you are"). Prior to transitioning across binary gender categories Chelsea's orientation to a future identity in which her body image and social gender are consistent is foreclosed. She utilises humanist discourses that construct a knowing subject to eventually make choices about her gender identity in the face of disapproval and risk.

Granovetter (1985) argues that an analysis of action that pays attention to the way that behaviour is 'embedded in networks of inter-personal relations' is able to 'avoid the extremes of under and over –socialised accounts of action' (Granovetter, 1985: 504). Chelsea's narrative does not fit comfortably with an under-socialised account of action because she does not make self-interested choices that are minimally influenced by social relations and/or structures. Chelsea describes, for example, how kinship relations delayed her decision to change her gender identity because she did not want to upset established connections with significant others. General assumptions about lines of connection between anatomical bodies and social gender also contribute to Chelsea's decision to defer her transition across binary gender categories. At the same time, social structural factors, such as gender roles or gender attributes, do not wholly determine Chelsea's decision to change her gender identity as an over-socialised account of action would suggest. In order to reconstruct her identity as female, Chelsea eventually circumvents normative understandings about the relationship between bodies and identities. Or to put it another way, Chelsea's female identity is not determined by the sexed social category to which she was ascribed at birth. Making sense of Chelsea's narrative involves attention to her immediate social context and the established histories of social relations that frame her interactions with others (Granovetter, 1985: 486). In this regard, Chelsea's talk is consistent with Granovetter's (1985) arguments about the way in which purposive actions are tied to the inter-contingencies of routine interactions that are simultaneously embedded in ongoing systems of social relations.

A post-structuralist perspective would consider the way that Chelsea's actions as a 'knowing subject' are produced by discourses about gender that are manifest in his/her everyday actions and in the telling of the story. Post-structuralist perspectives suggest that actors are not free to take up subject positions at will because individuals are able to choose from only a limited repertoire of available narratives, positions or representations. Transgender identities are excluded from the range of subject positions that are usually available to actors. Chelsea reflects on the way that her female subjectivity was thwarted because transgender identities are not easily accommodated within the range of available cultural and public narratives. For Chelsea, stories about transsexualism, embodiment, masculinity and femininity act as both resources for identity and as constraints on identity. In this narrative Chelsea is both constituted by

and takes up different subject positions as male and as female. Or to put it another way, she is both a constituted subject and a choosing subject. Through transitioning Chelsea characterises herself as making choices or as having agency. At the same time she recognises that she lives in a world that is discursively produced and she presents herself as a strategic actor.

Agency and identities

This chapter has explored differences and connections between liberal humanist and post-structuralist theories of agency. I have suggested that links may be developed between different epistemological positions on 'agency' through attention to narratives about action and identity articulated by people who participated in this research project. Most people do not consciously think of themselves as 'doing agency'. Some of the people who participated in this research did talk about agency in language that may be identified with a theoretical positioning. These people were actively engaged in crafting their identities and, at the same time, recognised the constructedness of gender in their own practices and in the practices of non-transgendered others.

Transgender identities are managed in the context of occupying bodies that confound conventional discourses associated with sexual difference. This lack of fit (White, 1992) between embodiment, subjectivity and 'ordinary' discourses about sexual difference as immutable allowed people who identified as transsexual or transgendered to reflect on the relationship between bodies, identities and gendered conventions. People who transition across binary gender categories have the capacity to tell inconsistent or contradictory stories about themselves. They are aware that their biography does not fit with the social/grammatical conventions for lived narratives to be consistent and linear (Davies and Harre, 1990: 59). In negotiating identity in the context of significant discontinuities between their corporeality and their gender identities, Jack, Anita and Chelsea sometimes emphasised essentialist and unitary identities as male/female or as transgendered, while at other times they provided post-structuralist accounts of identity as constructed, shifting and contingent. Transgendered people draw on essentialist understandings about themselves, presenting themselves as a unitary and consistently gendered subject with agency. At the same time they inhabit bodies that they strategically work on and they operate with multiple gendered and shifting identities. Consequently, the way people positioned

themselves in public narratives of sex and gender, and constructed themselves as people with the power to act, is able to be accessed in research informants' talk about the use of medical technologies for crafting gender. How embodiment impacts on the discursive positioning of subjects, and the constitution of subjectivity, is also explored in the following chapter. Similarities and differences between feminist analyses of cosmetic surgery and gender reassignment surgery are considered, as are connections and differences in the talk of clients who engage in elective surgical technologies for 'crafting gender'.

Crafting gender through medical technologies

Corporeality as resource and as constraint

SP: Do you think that gender reassignment surgery is different to cosmetic surgery?

“...I'd like to answer, yes, they are different, but in reality they are not, because all sex reassignment surgery, besides the functional aspect of being able to have sex in your chosen gender role, is cosmetic appearance. So in reality it is no different than cosmetic surgery, other than it can ease one's mind. But then again cosmetic surgery does that for people as well - they might be paranoid about their nose or whatever. So no, I don't think it is any different...”.

Anita, MTF, 1996

Anita's talk simultaneously collapses the distinction between cosmetic surgery and sex reassignment technologies and uses sexuality to maintain a distinction between them. Anita considers that the only difference between cosmetic surgery and gender reassignment surgery is the “functional aspect of being able to have sex in your chosen gender role”. She suggests that both forms of surgery are performed for ‘cosmetic appearance’ and that they may ‘ease’ the client's mind. Unlike cosmetic surgery, male-to-female gender reassignment surgery is not just aesthetic, it is functional in that it makes it possible for Anita to act in certain ways, to engage in penetrative heterosexual sex in her chosen gender identity. In this narrative, the focus is on changing the body to ‘ease the mind’. This assumes that minds are ‘disturbed’ by bodies that do not conform to certain expectations. Bodies should therefore be brought into line by surgery and it is this that is identified as one of the points of connection between cosmetic surgery and gender reassignment surgery.

Medical technologies associated with crafting gender make available a range of new possibilities for actors, who may in turn reshape their design, distribution and use.¹ In New Zealand for example, collective action associated with the risks of silicone breast implants have led to new technologies in the field of breast implants and new regulation of the relations between surgeons and clients. In short, technologies, including medical technologies, are inseparable from relationships of power. However, the meanings associated with different forms of surgical technologies and the way they are defined and understood at the level of everyday interaction, practice, and use may be quite diverse. Interviews with transgender people suggest that the significance of and moral codings attributed to those individuals who choose to engage in breast augmentation are different when it is used to enhance femininity, as in the case of women, to when it is used to change gender as in the case of male-to-female transsexuals. Despite this diversity, there are, I think, quite striking similarities first in feminist analyses of these practices, and second in the talk of clients who use cosmetic surgery and gender reassignment technologies. Indeed, one interpretation of this practice is that both cosmetic surgery clients and sex reassignment surgery clients are in some ways using medical technologies to craft gender and to construct themselves as agents, as people with the power to act.

This chapter considers some of the connections between sex reassignment surgeries and the general category of cosmetic surgery. Distinctions between sex reassignment surgery and cosmetic surgery are not clearly defined, as there are many ways in which these surgical categories may be understood as involving similar discourses and practices. Overlaps between cosmetic surgery and gender reassignment surgery extend to the feminist literature in the two areas, the medical/surgical training required, including techniques used by surgeons, the types of surgery used by clients and the way clients and practitioners articulate the desired outcomes of the surgery. This chapter explores similarities and differences in cosmetic surgery and gender reassignment surgery with a particular focus on issues of agency. Clients' talk about

¹ For example, complaints from women about problems experienced with silicone breast implants led to implants being withdrawn from sale in New Zealand in 1994. Saline implants are now presented as an option to silicone. Women who choose silicone implants are required to agree to quite detailed conditions prior to surgery, first by acknowledging known and unknown problems associated with silicone implants and second by giving formal signed consent to be placed on a register (Phibbs, 1994; Austrin and Phibbs, 1996). These conditions were implemented as a solution to the 1993/94 international scandal surrounding silicone breast implants and to complaints about problems experienced by New Zealand women.

their surgical procedures is discussed in the context of critical academic analysis of these forms of body modification.

Gender reassignment technologies

Most feminists who write about gender reassignment surgery take a negative view of this form of surgical reconstruction (Raymond, 1980; Garber, 1992; Hausman, 1995; Fausto-Sterling, 1993; Lienhert, 1995, 1998; Grosz 1994). They tend to explain clients' relationship to, and use of, sex reassignment technologies in terms of conformity to heterosexual regulatory regimes and the binary sex/gender system (Raymond, 1980; Billings and Urban, 1982; Butler, 1990; Hausman, 1995). According to this view the medical technologies involved in sex reassignment are shaped by dominant heterosexual understandings about sexuality, they reflect certain gender relations and assumptions about sexual difference and in turn shape public narratives about gender and therefore (in)appropriate gender identities (Haraway, 1991; Connell 1995). Moreover, individuals who engage in gender reassignment are constructed as cultural dupes and/or victims of the rigid binary "sex/gender system" in Western societies (Hausman, 1995: 140).

Bernice Hausman (1992, 1995) provides a detailed historical analysis of the development of gender reassignment technologies and the emergence of the transsexual subject. Her central argument is that the contemporary concept of gender was invented through the emergence of the transsexual subject within medical discourses (Hausman, 1995: 7). In this account, transsexuals are not victims of the sex/gender system, but are instead unwitting colluders in the medical and cultural maintenance of binary sex and gender categories (Hausman 1995: 139). The story of the transsexual as the unwitting colluder in the cultural maintenance of sexual difference is in contrast to Hausman's story of the transsexual as active agent in his/her interactions with medical professionals. Transsexuals, for example, 'worked to refigure' existing psychological categories in order to distinguish themselves from homosexuals and transvestites (Hausman, 1995: 130).

Transsexuals were successful in getting doctors to target their bodies and not their behaviours for medical intervention (Hausman, 1995: 130). Early transsexuals, such as Agnes (Garfinkel, 1967; Hausman, 1995: 1-6) and Wegener (Hausman, 1992: 270-271), manipulated sympathetic doctors into providing hormonal and surgical solutions

to their 'psychological malaise' (Hausman, 1995: 15). Attention to pioneer or 'celebrity' transsexuals – Agnes, Einar Wegener (Lili Elbe), Christine Jorgensen, Renee Richards,² - and to medicalised transsexual subjectivity means that the voices of 'ordinary' transgender people tend to be absent from Hausman's work. Hausman declares, for example, that as transsexual subjectivity is constructed by a demand for surgical and hormonal sex change, transsexual agency may be traced through the discourses of the medical professionals (Hausman, 1995: 110). Hausman's analysis tends to present transsexuals as strategic colluders with medical clinicians in a horrifying medical appropriation of the power to define socio-cultural understandings of gender. According to Hausman:

[that] the demand for sex change became the key signifier for transsexualism demonstrates the centrality of technology to the consolidation of transsexual subjectivity - asking for technologically mediated sex change is one and the same gesture to name oneself as transsexual and to request recognition as transsexual from the medical institution. In addition, by making their desired treatment absolutely clear, transsexuals encouraged a therapeutic response on the part of clinicians. In this way, transsexuals were actively engaged in defining their position within medical discourses (Hausman, 1995: 129).

The emphasis on demand for surgery as the primary symptom of transsexualism (Hausman, 1992: 278) makes transsexualism, and subsequent access to hormonal and surgical sex change, dependent upon self-diagnosis. Transsexualism is a medically regulated form of social identity that 'pushes patients toward an alluring world of artificial vaginas and penises rather than toward self-understanding and sexual politics' (Hausman, 1995: 128). Furthermore, the precarious identity of the MTF transsexual subject is evident in their ongoing need to use a range of technologies in order to mask their original sex:

Genetic sex cannot be altered; other secondary sex characteristics remain. In order to maintain the form of the chosen sex, transsexuals must engage daily in material practices that counteract the operation of those physiological processes that signify their original sex. Most of these practices are not unique to transsexual subjects (hormone intake, electrolysis, make-up, hairstyling, manicure, among others), but taken together these practices take up a significant portion of the transsexual subject's life and define the experience of living in a transsexual body. These material practices serve as reminders of transsexuals' transgressions of their original sexual physiology because they must be engaged in routinely in order to maintain the physical signifiers of their chosen sex. While this may, in fact, be a result of the

² See Hausman (1992, 1995) for her discussions of Lili Elbe (1992: 270-271; 1995: 15-19); Jorgensen (1992: 275-278); Anger (1995: 1-6); and Renee Richards (1995: 11-12).

resistance of the body's "real code" to the technological regulation of its processes, it signifies that this disruption of sexual difference is contingent upon continued and accurate technical management of physiological processes (Hausman, 1995: 240).

Hausman implies that transsexuals' compulsive relation to technology is problematic for three reasons. First, it masks the extent to which transsexuals are subjects who 'engineer' themselves; second, this self-engineered subjectivity is less 'authentic' than other forms of subjectivity because of its ongoing dependence upon technology; and third, it shores up binary notions of sex and gender (Hausman, 1995: 139-140). In Hausman's account, medical technologies are presented along a continuum of technologies of gender, including makeup, hairstyling, electrolysis, manicures, hormones, breast enhancement, sex reassignment. Hausman suggests that, because MTF transsexuals have to use more of these technologies in order appear feminine, their construction of femininity is less authentic than that constructed by "genetic women" (sic) (Hausman, 1995: 140). Her argument that subjectivities crafted through surgical intervention are not as authentic as other forms of subjectivity implicitly invokes the natural pre-surgical body in opposition to the 'artificial' post-operative body. In this sense, Hausman's analysis is underpinned by a form of biological essentialism that locates identity in the 'natural' (i.e. pre-surgical) physiological body. This argument suggests that socially constructed subjectivities are more 'natural' than technologically constructed subjectivities (Garber, 1993: 334). The hormonally enhanced feminine subjectivities of transsexuals, and presumably HRT consuming menopausal women (or 'Viagra' consuming men), also fall into this category of illegitimately crafted subjectivities, as do the surgically reconstructed bodies of women who use cosmetic surgery.

Norrie May Welby, a transgender performance artist interviewed for this research, draws on ideas that are consistent with Hausman's argument about the centrality of medical technologies to the development of transsexualism and at the same time turns this argument on its head. Welby acknowledges transsexuals' dependence on medical technologies, but rather than privileging a medical narrative of the demand for sex change surgery s/he locates this demand, and therefore transsexuals' dependence on medicine, in social relations and processes that privilege normative understandings about the relationship between the biological body and social gender.

I want to emphasise that sex change surgery is only sought because it exists. Prior to its invention it was not sought. There were not individuals seeking to change their anatomy prior to medicine's inventing that technology which happened partly as a result of them operating on intersex children, partly as a result, in my view, of them doing genital surgery on people damaged by land mines... I believe that in a society where I'm OK, you're OK, is the rule, not the exception, then no-one will bother to seek any form of cosmetic surgery. And I define cosmetic surgery as that which is undertaken not to save our lives, or not to make us more biologically healthy, but to assist those to fit into some role that we think we should fit into. Whether that is strictly gendered male or female, or whether we think as women we have to look young and attractive when we are fifty, and have face lifts...

Norrie May Welby, 1997

Welby locates the demand for surgeries to recraft identity in a complex nexus between technological advances in medicine and social relations and processes that privilege lines of connection between anatomy and social gender. Welby suggests that individuals who seek either cosmetic surgery or sex reassignment surgery are pressured into altering their bodies by the availability of the surgery and social expectations about youth and beauty or lines of connection between genitals and social gender. Both women who engage in cosmetic surgery and individuals who use gender reassignment technologies in acquiescing to these pressures create and perpetuate the demand for the surgical alteration of the body. Welby argues that there is very little distinction between cosmetic surgery and gender reassignment surgery because both forms of surgery are performed to make bodies conform to conventional expectations. S/he locates the demand for surgical alteration in social expectations about gender and suggests that clients internalise these expectations to the extent that they are prepared to use medical technologies to recraft their gender identities. His/her analogy simultaneously collapses the distinction between cosmetic surgery and gender reassignment surgery as discrete medical procedures, the distinction between the social origins of these surgeries and the distinction between clients who use these procedures. Both Welby and Hausman are resistant to surgically crafted subjectivities and operate with what Granovetter (1985) would refer to as an over-socialised concept of transsexuals and women who access cosmetic surgery.

Welby and Hausman are critical of the construction of self through surgical means. Norrie May Welby suggests that women who engage in cosmetic surgery, and people who have or desire sex reassignment surgery, do so in order to bring their body into line with generalised understandings about how their bodies should appear. Hausman (1992: 288-289) correctly points out that sex change surgery is made possible only

through the acceptance of fixed notions of psychological identity, while the body is viewed as a plastic and malleable commodity. The same argument could also be made in relation to the discourses and practices surrounding cosmetic surgery. The location of gender identity in the psychological realm privileges the mind over the body, and this analysis implicitly deploys a mind/body split argument. However, conceiving of the physiological body as the 'natural' template on which normative constructions of social gender are built, also in some respects privileges the body over the mind. An explicit example of the way that a form of biological essentialism associated with the natural body is used in Hausman's work is provided in the following extract in which Hausman argues that attention to the way transsexuals use technology to engineer their chosen subjectivity in the face of the bodily resistances from its 'real' (presumably genetic) 'code' is to:

recognise the significance of the surgical and hormonal construction of the *natural* body to the social configuration of subjectivity (Hausman, 1992: 301 and 1995: 140 italics my emphasis).

Hausman's analysis of transsexualism does not adequately explore the way that biology is also a social discourse that is open, shifting and contingent (Haraway, 1991; Findlay, 1995). Thomas Laqueur (1987, 1990), Donna Haraway (1991), Deborah Findlay (1995), Marilyn van den Wijngaard (1997) and Alice Dreger (1998) argue, for example, that scientific statements about 'sexual difference' are not independent of the cultural work that is done by 'gender'. Thomas Laqueur (1990) traces the historical development of the modern two-sex model. He notes that, following the scientific revolution, the 'cosmos' could no-longer justify hierarchical differences between the sexes. By the Eighteenth Century the stable ahistorical sexed body provided the epistemological foundation for the social order. Within this model the 'uterus provided the naturalistic explanation and justification for the social status of women' (Laqueur, 1990: 150). Furthermore, Laqueur states that these dualistic understandings of sexual difference are 'imagined':

Despite the new epistemological status of nature as the bedrock of distinctions, and despite the accumulation of facts about sex, sexual difference in the centuries after the scientific revolution was no more stable than it had been before. Two incommensurable sexes were, and are, as much the products of culture as was, and is, the one-sex model (Laqueur, 1990: 153).

Laqueur (1990: 151) suggests that the modern sexes continue to be 'invented'. Donna Haraway (1991: 76) also argues that claims about sexual difference that identify the 'truth' of biology in the origin of the gene are indicative of the power of language to 'make flesh'. Scientific knowledge, nature, the gene and the word are pressed into service as technologies of power for an 'androcentric science'. Deborah Findlay (1995) and Marianne van den Wijngaard (1997) provide a comprehensive analysis of the forms of androcentric bias that have characterised sex-difference research. They argue that dualistic understandings of the body, sexuality and behaviour that have originally been constructed through laboratory research are simplified and maintained in medical practices (Findlay, 1995: 37-39; Van den Wijngaard, 1997: 84). Research findings that did not fit with dualistic understandings of masculinity and femininity were less likely to be accepted as 'scientific fact'. Van den Wijngaard argues for example that:

Dual images of masculinity and femininity were conditions for the scientific acceptance of the prenatal hormone paradigm: Presence of androgens, "male" hormones, made a brain masculine, absence of this chemical made a brain feminine. The similarity with Freud's thinking is striking: presence or absence of a penis is constitutive for being a man or a woman (Van den Wijngaard, 1997: 97).

The dualistic ideology concerning hormonal functioning is also evident in the area of genetics. Alice Dreger (1998) notes that the X and Y chromosome pattern is typically understood as determining sexual difference. However, genes related to nonsexual characteristics are located on the X chromosome and genes related to sexual development appear on chromosomes other than X and Y chromosomal pattern (Dreger, 1998: 4). The relationship between XX chromosomes and female bodies and XY chromosomes and male bodies is also disrupted by people with androgen insensitivity syndrome (AIS).³ These people have XY (male) chromosomal patterns and female bodies. The construction of AIS as a pathological condition maintains the binary whereby XX is aligned with female bodies and XY with male bodies (Dreger, 1998: 7; Kitzinger, 2000: 388). In this regard the genetic code located in the 'sex chromosomes' is privileged over physiology.

³ Complete Androgen Insensitivity Syndrome (CAIS) occurs in one in every 20,000 fetuses with approximately half diagnosed at birth and the remainder at puberty when menstruation fails to begin. Partial Androgen Insensitivity Syndrome (PAIS), a variant of AIS, results in mixed genitals (See Kitzinger, 2000).

The combined works of Laqueur, Haraway, Van den Wijngaard and Dreger suggest that scientific discourses about anatomy, hormones and genetics are shaped by cultural understandings about masculinity and femininity. Hausman's (1995:140) reference to genetic sex as that which cannot be altered - as evidence of the 'truth' of male and female biology and by implication the falsity of post-operative transsexual bodies - is problematic in light of these arguments. Or to put it another way, Hausman's construction of transsexuals as 'other' maintains 'the fiction of proper and normal genders' (Halberstam, 1998: 162). Hausman does not take the opportunity to question the way in which the ideology of sex change surgery, and her objections to it, privileges the genitals as the site and sign of sexual difference. Rather than taking an either/or approach to the relationship between the mind and body, it may be more productive to explore contradictions and ambiguities in the way that mind, body and technologies are co-implicated in the construction of identity - of which transsexualism, sex reassignment surgery and elective breast surgery are exemplary examples.

Hausman's (1995: 139) argument that transsexuals use a range of technologies to engineer themselves rests on an assumption of an undifferentiated transsexual who occupies a unitary position in relation to clinicians and medical technologies. Transsexual or transgendered people are not unified in their identification with the label 'transsexual' or 'transgender'. Nor are they unified in their relationship to, and use of, medical technologies. There are just as many differences between individual transsexual's opinions about medical technologies as there are similarities, the former being potential sources of cleavage within transgender communities.⁴ Wendy, a post-operative male-to-female transsexual interviewed in 1996 suggests that medical narratives about transsexualism do not reflect the diversity that she has observed among people who identify as transsexual or transgendered:

What I am saying is that there is accepted dialogue, language and terminology, to describe groups of people, but these are often abstractions, and they are often borrowed from the medical world, and they fit uneasily with what I have observed myself over the last say two years of (people who have gender issues) coming into contact with me.

Wendy, MTF, 1996

⁴ See Chapter Nine for a discussion of social and political differences among people who identify as transgendered or transsexual.

All transsexuals do not occupy the same position in relation to sex reassignment surgery - for example there are significant class and gender differences as well as differences on the basis of surgical status, sexual orientation and culture. Jimmy who identifies as a “trany boy” talks specifically about this difference in the relationship to medical technologies for female-to-male transsexuals:

...in my opinion MTFs can go out and get an operation, or they can raise the money, they start off as men so their income is, like it is a big assumption I guess, but their income is better to start with and they usually fall into those kind of jobs where they are earning more, or they have got the money there to start with. Then also surgically in terms of operations and stuff it is quicker for a MTF than a FTM. [For FTMs] it is a more drawn out process, and it is more expensive in the long run and it is more of a health-taxing thing.

Jimmy, FTM, 1996

A sense of frustration at the lack of surgical options for FTMs is also captured in the following narrative in which Jack talks about being unable to be spontaneous as a heterosexual male. Jack also draws on a master script that associates heterosexuality with penetrative intercourse:

With the boys I guess most of us really do desire, it is a real pain in the butt having to put a dick on and a dick off in the day time and have another one for sex. A detachable penis is the sign of our lives. We have to choose what time of the day it is. Is it time for a fuck, or is it time to be just using day wear, you know what I mean. I suppose we are lucky, it is like a girl with a frock, she has her day wear and she has her evening wear, ours are like stuck in our pants instead.

Jack, FTM, 1996

Female-to-male transsexuals are not positioned in relation to medical technologies in the same way as male-to-female transsexuals. Judith Halberstam (1998: 161) also critiques Hausman for her failure to critically analyse differences between the surgical options that are available to MTFs and FTMs. Hausman (1992: 286-289) does outline the history of the development of phalloplasty and vaginoplasty. She comments that ‘there is a significant gender gap in the alterability of human genital tissue’. For Hausman these differences are not the result of an androcentric medical profession more interested in constructing vaginas than perfecting penises. Instead they are ‘real distinctions’ that are the result of corporeal limitations in (re)constructing ‘the physical signifiers of sex on the operating table’ (Hausman, 1995: 288).

Some feminist analyses of transsexualism link demand for surgical sex change to a denial of homosexuality and/or conformity to heterosexual expectations about lines of connection between genitals and social gender (Raymond, 1980; Butler, 1990: 71; Findlay, 1995: 42-43). This interpretation of transsexualism privileges sexuality over gender; instead feminist analyses of hormonal and surgical sex change should be open to the possibility that gender identity may be more crucial than conformity to heterosexual regulatory regimes. In the following narrative Jack suggests that for many lesbian identified MTF transgenders it is sexuality that is fixed, gender and anatomy are changeable:

...They [lesbian identified MTFs] still feel that they are women, and they are still attracted to women. What they are doing is they are changing their gender they are not changing their sexuality. Like I'm still attracted to women but then again I've started becoming attracted to men too. Whoever you are sexually attracted to is not necessarily affected by the fact that you are changing your gender. People make that presumption, they get confused by gender and sexuality being one and the same, and they sure as hell ain't. That is why I consider myself a transgenderist not a transsexual.

Jack, FTM, 1996

For Jack the term 'transgender' more accurately represents his journey across binary gender categories than does the term 'transsexual'. Jack resists the label transsexual, as for Jack the words 'sex' and 'sexual' contained within the term 'transsexual' problematically collapse the distinction between biological sex and sexuality, a distinction which Jack wants to maintain. Chelsea also wants to maintain a distinction between sexuality and gender. She suggests that a transgendered person's gender identity is not defined by who you have sex with:

I think this is a misguided idea that gender is the same thing as sex. The bottom line for me is that who you have sex with does not define yourself as either a man or a woman. I've seen this criticism labeled at, there are some lesbians who think that transgendered guys are just lesbians with lots of guilt, which is silly because I have seen transgendered men and transgendered women have all sorts of sexual orientations and some women are lesbians, others are hetero, others are bi-sexual, and the same thing with the men. It [sexuality and gender] has got no relationship whatsoever.

Chelsea, MTF, 1996

Jack, a FTM 'transgenderist' and Chelsea, a MTF disrupt assumptions about lines of continuity between sexed identities, biological sex, social gender and sexuality. For

Jack, sexuality is fixed, gender is changeable, this is in contrast to Angie who indicates that it is sexuality that is changeable and gender that is fixed:

I have read an article that suggested that there were 18 sexes going from straight macho male to straight feminine female and right down the centre was transsexual because that was the cross-over between the two. Basically it went straight male macho masculine, straight male feminine, gay male masculine, gay male feminine, then there was a couple of things like Klinefelter's syndrome and the female side basically mirroring what was on the male side. So you have got two genders but you have got varying sexualities.

Angie, MTF, 1996

Sexuality occupied a contradictory position among the transgendered people to whom I talked. In Chapter Two Nick suggested that gender and sexuality were different: 'A lot of people confuse gender and sexuality and the two have nothing to do with each other'. Others employed sexuality as a way to shore up their social gender identities as male or as female. At the beginning of this chapter, for example, Anita suggested that she wanted to have genital surgery so that she could 'function sexually' in her 'chosen gender role'. Transsexuals who adopt an either/or approach to gender by choosing to have gender reassignment surgery, and who engage in homosexual encounters post surgery, disrupt the sex/gender binary and render problematic oppositional readings of post-operative transsexual bodies as conformity to heterosexual regulatory regimes.

Hausman (1995: 110) argues that transsexuals' use of sex change surgery is illustrative of their "desperation" and "dependence" on medical technologies. Hausman's negative analysis of medical technologies could be criticised for being overly pessimistic and moralistic. Analyses of patriarchal power, as operating through violence, objectification and repression, are unable to explain adequately why many transsexuals view medical technologies as beneficial and enabling or why transsexuals voluntarily engage in them (Sawicki, 1991; Davis, 1991, 1993). Rather than focusing exclusively on the terrain of control in cultural production, analyses of sex change surgery should investigate the ways in which forms of conformity, resistance and refusal are enacted through surgical alteration of the body. This involves analysing discursive texts and the meanings, pleasures and experiences of individuals who use sex reassignment technologies (Shultze, 1990: 66-67).

Halberstam (1998: 160) also suggests that, in defining transsexual subjectivities, Hausman attributes too much power to the medical professionals. Halberstam argues for example that:

There are many bodies that escape and elude medical taxonomies, of bodies that never present themselves to the physician's gaze, of subjects who identify within categories that emerge as a consequence of sexual communities and not in relation to medical or psychosexual research (Halberstam, 1998: 161).

In Sydney, in 1996/97, medical narratives about transsexualism, decisions to use gender reassignment technologies and individual desire for surgery, were embedded within critiques of medicalisation and narratives about identity developed by transgender activists that circulated within the transgender community. Unlike cosmetic surgery, genital reassignment surgery for MTFs, and a hysterectomy for FTMs, is associated with a significant and tangible 'institutional reward': in New South Wales state legislation allows post-operative transsexuals to change the sex designation on their birth certificate. The contradictions and ambiguities surrounding this legislation are discussed further in Chapter Eight. It is important to note, however, that despite the convenience of a 'paper identity' that is consistent with a transsexual's (post-operative) gender identity not all of the people whom I interviewed wanted to change their anatomy. In fact I was surprised to learn from one transgendered informant that approximately 80 percent of MTFs who identify as transsexual or transgender in Australia, and have passed clinical assessments as candidates for vaginoplasty, do not go on to have the surgery. The person suggested that most of the reasons that many people decide not to continue with surgery are financial, political, medical⁵ or related to lack of access.⁶ Fear of a poor outcome was also a contributing factor. Genital surgery was seen as problematic by some of the people whom I interviewed. Jack, an FTM, did not want to have genital surgery because he considered it to be too experimental. In the following narrative he also reflects on some of the problems associated with the more established, but still 'risky', MTF surgery:

⁵ Most of the people whom I interviewed who were pre-operative wanted to have genital surgery. Some remained pre-operative because of their current circumstances rather than because they had changed their mind.

⁶ Transsexuals born in South Australia, for example, are allowed to change the sex designation on their birth certificate only if reassignment surgery is performed in South Australia. Limited sex reassignment surgery as available at the time that the legislation was passed (in 1988). However, at the time of writing sex reassignment surgery was not available in that State – see Chapter Eight for further discussion about this.

There are quite a few (MTF) transys out there who are quite happy not to have surgery. One of the reasons being that the down side of the surgery is the other medical problems associated with it and the possibility of unsuccessful surgery. I won't say failure, because that lies with each individual. Medically they could say that it is a failure but physically or emotionally to you it is not or vice versa.

Jack, FTM, 1996

Individuals who identify as transgendered and refuse to adopt an either/or approach to gender by resisting sex-change surgery disrupt male/female, mind/body, normal/abnormal oppositions and problematise oppositional readings of transsexualism as conformity to normative expectations about gender and the biological body. Jack provided the following response to my suggestion that gender reassignment surgery could be interpreted as conformity to social expectations about lines of connection between gender and anatomy:

The surgical intervention that I've already had, it is really hard work to analyse that without going, *it does matter*, in that I'm so much more comfortable now having had my chest done and I don't have to wear strapping underneath my shirt. I had to wear another shirt in the middle of bloody summer. The comfort and the ease with which I live and then that (binding my chest) was because I was attempting to make my chest look masculine in the face of a female body, and for society.

Jack, FTM, 1996 (emphasis Jack's)

Jack resists genital surgery, but he has had his female breasts reduced so that his chest looks more masculine. He is torn between the attractions of political analysis that embraces the possibilities of a male identity and a female body and his embodied experience of this reality. Jack is aware of the contradiction between his decision to have this 'incredibly painful' and 'humiliating' surgery and the non-operative position advocated by some transgender activists. Jack's experience makes him resistant to the idea that the physicality of his body does not matter. In this narrative Jack's chest reflects his male identity making him feel masculine in spite of his female body. The convenience of his day to day life since the reduction reinforces the initial decision to have the surgery. At the same time, Jack acknowledges that he had the surgery and bound his chest in order to conform to the normative expectation that men do not have female breasts.

Hausman's aversion to the surgically crafted subjectivities of transsexuals implies that the experiences of individuals whose bodies conform to normative expectations

about the relationship between biology and gender may be the more legitimate subjects for feminist analysis and debate. However, one strategy of moving beyond oppositional analyses of 'normative' bodies, would be to look at the ways non-normative bodies disrupt and render problematic dualistic conceptions of gender and sexuality. Transsexuals, for example, who articulate understandings about gender and/or sexual identities that are based in essentialism and, at the same time, use surgery to reconstruct their bodies in order to fit their desired gender and/or sexual identities, disrupt the essentialist/social constructionist nature/culture binaries. Like cosmetic surgery clients, transsexuals are not cultural dupes of the sex/gender system or medical technologies. Transsexuals are able to recognise the flawed assumption that gender is immutable and at the same time often express their gender identity in essentialist terms relating their identification with the (biological) other as an expression of a core being or inner-self. In the following interview extract Mary attaches essentialist understandings of 'male' and 'female' to the biological body. At the same time, she suggests her mind is not unitary and neither is her body. She presents herself as someone who is satisfied with her decision to have surgery and she constructs herself as an agent.

Well to me gender reassignment surgery was the smallest step, the final tiny small little step in a long process. And I can understand why some people particularly female-to-male elect not to go through reconstruction, for me I still did not feel complete and whole, I mean I wanted to feel like a complete person, I mean OK, yes, I would never be biologically completely female, I mean you just cannot remake people like that, so again it comes down to a compromise between your head and the body that you occupy and to me again it has been a good compromise, it is a good compromise. Whether that relates to the same thing in terms of cosmetic surgery I guess people do that mostly for self-esteem, whether they do it to feel complete and whole I don't know.

Mary, MTF, 1997

The messy problem of having and occupying a body is indicated in how Mary's experience of her physical body impacts on her sense of self. For Mary identity is essentially corporeal in the sense that selfhood becomes problematic when it does not map onto the 'body that you occupy'. Surgery is not an ideal solution to this dilemma, but is instead represented as a 'good compromise' between the body and mind. The description of surgery as a compromise suggests that Mary does not consider that her actions involve an absolute privileging of mind over body. Instead surgery is an inevitable, but essentially inadequate solution to an identity that is experienced as incomplete. In this narrative, the body acts both as a resource and as a constraint on

identity. Mary constructs herself as an agent, but one operating in the context of constraint: the constraints of a personal history as 'boy' and a woman and the constraints of a body that can be reworked but is not complete. Mary takes action that is shaped by desires for 'completion', but she sees these desires as potentially unreliable.

Mary's parents recognised that she was transgendered at an early age and facilitated her (medical) transition across binary gender categories. She claims that she was never a man, transitioning early meant that she went from being a boy to a woman. Her surgery was successful, with few post-operative complications, and she now has very little contact with other transgendered people. Mary's personal narrative is embedded in local debates about heterogeneity that emerge out of transgender politics. She does not present her course of action as one that is suitable for all transsexuals. Mary acknowledges that 'some [transsexuals] do not go ahead with the surgery' indicating that she has encountered variations between transsexuals in their relationship to medical technologies.

In this narrative, Mary indicates that her preoperative identity is that of a female. Surgery is the 'smallest step in a long process'; it does not represent a rite of passage that makes her into a woman. Mary's experience disrupts common sense lines of connection between anatomy and social gender. However the hierarchical organisation and institutionalisation of the binary oppositions that constitute sex and gender remain largely unchallenged. Mary draws on essentialist arguments that locate femaleness in biology. She operates with essentialist understandings about her non-unitary self, and she uses surgery and hormones to actively craft her gender identity. For Mary, the meanings associated with biology are natural and ahistorical, while (her own achievement of) gender is cultural, local and historical. Attention to the materiality of bodies enables us to look critically at essentialism while recognising its strategic utility in narratives and understandings about selves.

Cosmetic surgery

The talk of women who engage in the discourses and practices of cosmetic surgery may also incorporate resistant or critical discourses about cosmetic surgery that challenge understandings of clients as cultural dupes. In this section I argue that taking the agency of women seriously involves acknowledging the contradictory and ambiguous practices of women who engage in cosmetic surgery.

Most feminists who write about women's relationship to, and use of, cosmetic surgery tend to explain it in terms of commercial exploitation, patriarchal and racial oppression (Spitzack 1988; Young 1990; Wolf 1991; Morgan 1991; Bordo 1993a, 1993c; Hausman, 1995; Balsamo 1996; Kaw, 1998). They generally stress the negative impacts of surgical alteration and caution women against its use. Within these analyses women who engage in cosmetic surgery are often constructed as 'cultural dupes', while their status as victims of prevailing beauty norms is provided as evidence of their oppression (Spitzack, 1988; Young, 1990; Wolf, 1991; Morgan, 1991; Bordo, 1993a, 1993c; Hausman, 1995; Kaw, 1998). Bernice Hausman (1995: 64-65) for example, suggests that women are '*victims* who are powerless in their relation to social norms of beauty, and thus the cosmetic surgery establishment' which developed as a result of modern medicine's 'increasing ability to intervene in and on the human body'.

Feminist analyses which emphasise the exploitative nature of cosmetic surgery tend to imply that women who engage in cosmetic surgery are falsely conscious of the social construction of beauty and body image in modern Western societies (Young, 1990; Wolf, 1991, Morgan, 1991, Bordo, 1993a, 1993c; Kaw, 1998). In Kathryn Pauly Morgan's (1991) and Naomi Wolf's (1991) analyses of cosmetic surgery, women's actions are explained through particular interests that are assumed to be foundational to the construction of female gender identities and gendered bodily practices. Making sense of the actions of women who engage in cosmetic surgery becomes a matter of placing people in the right social categories, explaining cosmetic surgery in relation to patriarchal, professional medical, and/or economic interests and defining which categories of women are more or less disadvantaged in relation to those interests. Actors in the same social category have shared attributes, interests and practices regardless of difference in residence, age, occupation, family composition etc. This form of reasoning presupposes that women have particular interests, and are subjected to similar forms of oppression, because one aspect of their identity fits into one social category. In this analysis gender stands in for experience, because it is assumed that the gender identities of female cosmetic surgery clients are foundationally constituted in relation to patriarchy, medicine and consumer culture (Somers, 1994: 623). Moreover, there is apparently no need for researchers to talk to actual cosmetic surgery clients because it is taken for granted that their actions could be explained by the interests associated with the particular social categories that they happen to occupy.

An alternative explanation of women's relationship to cosmetic surgery is one which considers complexity by acknowledging the potential pleasures and benefits of cosmetic surgery for individual women while also exploring the dilemmas and risks involved in women's cosmetic surgery decisions (Davis, 1991, 1993, 1995; Phibbs, 1994; Parker, 1995). Central to this analysis is an acknowledgement of women who choose to engage in cosmetic surgery as active agents rather than as cultural dupes. The contradictions and ambiguities associated with agency are a central concern in Kathy Davis' (1991, 1993, 1995) approach to cosmetic surgery. She argues that feminist analyses of cosmetic surgery need to take seriously women who choose to surgically modify their bodies (Davis, 1991: 35; 1993: 35). Davis criticises the lack of attention to the contradictions and ambiguities of agency in many feminist accounts of cosmetic surgery on three grounds.

First, the cultural dupe approach does not pay sufficient attention to agency; cosmetic surgery may be 'actively chosen and knowledgeably defended' by women (Davis, 1991: 29) as simultaneously a problem (a form of oppression) and a solution (Davis, 1991: 32; 1993: 30) (a way of temporarily achieving liberation through changing their embodied relationship to discourses and practices of femininity). Second, Davis argues that feminists tend to focus on the actual processes involved in surgically modifying the body, and tend to ignore the way that cosmetic surgery is also a way for women to recraft their identities. As such, cosmetic surgery is presented as a disembodied phenomenon. Women's active and lived relationship to their bodies tends to disappear in feminist accounts of beauty practices (Davis, 1991: 29). For Davis (1991: 29) this disembodied approach to cosmetic surgery reproduces the mind/body split and reinforces dualistic understandings about the female body. The deficient female body is surgically altered so that it is more closely aligned to cultural ideals of femininity. The decision to have cosmetic surgery is represented as a cognitive exercise, a matter of bringing the body into line with the mind/body image of the woman. This analysis privileges the relationship between the mind and cultural expectations about femininity and tends to gloss over an individual's experience of her body.

Third, a feminist approach to cosmetic surgery that privileges narratives of oppression and exploitation restricts feminist interventions in the area of feminine beauty practices (Davis, 1991: 29). Rather than an exclusive focus on the way that public narratives and representations of femininity and masculinity are reproduced and reinforced by women's engagement in cosmetic surgery, Davis argues for an analysis of

cosmetic surgery that also considers how individual actions and story-lines may undermine and transform those very same structures (Davis, 1993: 28-29). Davis argues that many women who choose cosmetic surgery make decisions about their surgery in the context of limited structural opportunities for women. She suggests that it should be possible to criticise the social relations and processes in which cosmetic surgery is embedded without constructing as victims individual women who may choose to surgically modify their bodies (Davis, 1991). Davis calls for a more sophisticated concept of agency that considers women who engage in femininity work as rational and knowledgeable actors, who make informed choices within the context of particular structured limitations that are mostly beyond their control. Davis' use of agency is based on an understanding of the ways in which actors simultaneously take up and are taken up by particular discourses and practices like those associated with beauty and cosmetic surgery (Davies, 1997).

In 1994 I explored how the talk of women who had engaged in different forms of 'elective' breast surgery could be used to problematise theoretical and cultural generalisations about feminine embodiment and its relationship to the discourses and practices of cosmetic surgery. Conversations with women clients and plastic surgeons suggested that cosmetic surgery was not only about sculpting and changing body shapes; it was also about recrafting identities. The women that I interviewed in 1991 and 1994 often described their cosmetic surgery in terms of personal and physical transformation. Sarah, a cosmetic surgery client, described how breast augmentation enabled her to be a 'different person' through enhancing her self confidence:

I have heaps of confidence and I feel a different person. It is a confidence booster, you come across more confident, and the way people react makes you confident (Sarah, 1994).

Women who engaged in cosmetic surgery also talked about how recrafting their bodies enhanced their psychological well-being. In the following interview extract Lucy, a 28 year old librarian, talks about how her breast reduction made her body more acceptable to herself:

The major difference though is how I feel about my body, but also how other people see it, so that I can actually feel OK about my breasts (Lucy, 1991).

The women I interviewed for my earlier work on cosmetic surgery emphasised the way in which breast augmentation increased their self-esteem, gave them confidence, enhanced their femininity, and, as a result, their sexuality. Isabel, who at 32 years of age had eye surgery and breast implants following the break-up of her marriage, indicated that augmenting her breasts meant that she was able to pursue a more sexual image 'I had implants because I wanted to look sexy'. Looking sexy was also achieved through her choice of clothing 'clothes shopping is much better, I feel more sexual'.

Discourses about normality, gender and sexuality framed the talk of women who engaged in cosmetic surgery. The women interviewed in 1991 and 1994 used cosmetic surgery to bring their bodies more into line with an image that they had of themselves. This parallels some of the feminist literature on and interview talk about gender reassignment surgery. Conversations with people who identified as transsexual or transgendered suggested that they also explain their elective surgery decisions in terms of sculpting and changing body shapes and recrafting identities. Female cosmetic surgery clients were often aware of critical positions on cosmetic surgery. Sarah, a 34 year old sales representative for a medical company that sells breast implants, said that she encountered resistance from her mother and friends over her decision to enhance her breasts: 'I told all my friends, the majority thought it was not a really good idea because of all the publicity [about the risks]'. Sarah said that her experience of breast augmentation meant that she was able to be a more effective sales representative. She saw herself as an asset to her company - a tangible demonstration of confidence in their product.

The women I interviewed also reflected critically on the way that appearance pressures influenced their decisions to have cosmetic surgery. Isabel suggested that the disapproving gaze of other women was a major contributor to her eventual decision to enlarge her breasts. She hesitantly confided: 'this is going to sound strange but I did it not only for me but for other women'. Isabel's tentativeness suggests that she perceived that it was unusual to refer to the female gaze as a reason for enhancing her breasts. Sarah and Isabel talked about how breast enlargement conformed to expectations about femininity that are defined by men. Isabel suggested that 'men are not subject to the variations of women's bodies so it is easier for them'; 'it would be better if men's expectations were less'. Sarah considered that breast augmentation catered to the male gaze: 'men do find large breasts more attractive and I suppose it [breast augmentation] reinforces that'. Maria, a 46 year old former cosmetic surgery client who became a

political activist as a result of her experiences of implant failure, claimed that she had nose, breast and chin surgery, not because she was a cultural dupe, but because she was 'acutely aware of the value that is attached to beauty'. The women to whom I spoke recognised the ways in which they were constituted in and through discourses about beauty, youth, femininity and heterosexuality and they presented themselves as strategic actors in relation to those discourses.

Alternative feminist constructions of 'the natural' body feature in feminist criticisms of cosmetic surgery (Wolf, 1991; Morgan, 1991; Hausman, 1995). When feminists are resistant or critical of women's decisions to use cosmetic surgery to conform to a 'traditional' image of femininity or transsexuals' decisions to use sex change surgery to conform to normative understandings about the relationship between sex and gender, they often attempt to construct alternative feminist discourses about the 'natural' body. These discourses neglect to recognise that the 'natural' images being constructed as alternatives to surgical modification are in themselves normalising images of embodiment. It is important to reflect critically on the construction of feminist alternatives and what counts as appropriate ways to rework 'the body' within different contexts.

Some interesting continuities emerge from a comparison of feminist analyses of cosmetic surgery and gender reassignment surgery. Many feminist analyses of gender reassignment surgery offer text-based analyses that construct clients of medical technologies as cultural dupes (Hausman, 1995; Lienert, 1995, 1998). These analyses do not consider the contradictions and ambiguities associated with agency. They focus on the actual modification of the body and devalue the way surgery may be used to craft identity. They also deploy a problematic notion of the natural body as that unaltered by surgery (Wolf, 1991; Morgan, 1991; Hausman, 1995). In many feminist analyses of cosmetic surgery women are characterised as helpless victims of medical technologies (Morgan, 1991; Hausman, 1995). In contrast, transsexuals are often constructed both as dupes of the medical establishment and as active agents who work in a collaborative relationship with medical professionals (Raymond, 1980; Hausman, 1995). An alternative approach is a feminist analysis of sex reassignment surgery and the (re)construction of gender which considers complexity, which questions whether transsexuals or women who engage in cosmetic surgery are indeed cultural dupes and explores the ways in which action on the body is a potential source of empowerment as well as control (Davis, 1991, 1993, 1995; Phibbs, 1994).

During my research with people who identified as transsexual and/or transgendered I noted some interesting similarities between the talk of people who had used, or desired, gender reassignment surgery and the talk of women who engaged in elective breast surgery. Both groups of people were involved in (re)crafting their identities through sculpting and changing the shape of their bodies. Public narratives of sexuality, gender and normality were used to justify and explain the surgical desires and decisions of the people that I interviewed. I want to return now to an analysis of the similarities and differences between cosmetic surgery and sex reassignment surgery that focuses on the talk of clients who engage in these technologies.

Speaking comparatively - using medical technologies to craft gender

...women are *victims who are powerless* in their relation to... the cosmetic surgery establishment (Hausman, 1995: 64 *italics my emphasis*).

Transsexuals were *actively engaged* in defining their position within medical discourses (Hausman, 1995: 129 *italics my emphasis*).

The above extracts from Hausman (1995) are illustrative of the paradox that I have noticed within feminist analyses of cosmetic surgery and gender reassignment surgery. In Hausman's analysis of cosmetic surgery women accessing cosmetic surgery are characterised as helpless victims of medical technologies.⁷ For Hausman medical objectification is antithetical to subjectivity. How women clients may shape the application of these technologies is given scant recognition.⁸ In contrast she constructs transsexuals as simultaneously victims of medicalisation and as active agents who work in a collaborative relationship with medical professionals.⁹ How is it that Hausman ascribes so little agency and knowledgeability to women and a degree of agency to transsexuals? Furthermore, what do people who transition across binary gender categories think about the relationship between cosmetic surgery and gender reassignment technologies?

⁷ Also see Spitzak, 1988; Morgan, 1991; Wolf, 1991.

⁸ See Cussins (1998) for a discussion of the relationship between medical objectification and the subjectivity of women who engage in IVF technologies.

⁹ Also see Raymond, 1979.

When I began this thesis I was interested in looking at similarities and differences between cosmetic surgery and gender reassignment surgery. I expected that transsexuals would argue quite passionately that gender reassignment was a fundamentally different type of surgery to cosmetic surgery because it changed a fundamental aspect of their identity. I was prepared for arguments which suggested that gender reassignment was a 'rite of passage' that 'made' transsexuals into their chosen gender identity whereas cosmetic surgery simply reshaped an aspect of the body. I was wrong. Only a minority of the people that I interviewed adopted this 'rite of passage' position. In interview after interview respondents agreed that cosmetic surgery and gender reassignment were broadly similar. The talk of transsexual and transgendered research informants deconstructed the opposition between cosmetic surgery and gender reassignment surgery as discrete medical procedures, the distinction between the social origins of these surgeries and the distinction between the motives of clients who use these procedures.

Many of the people I interviewed reflected critically on their decisions to engage in gender reassignment technologies. In doing so they challenge sets of understandings about people who have gender reassignment surgery as cultural dupes of the sex/gender system. Differences between cosmetic surgery and gender reassignment tended to centre on public perception and the latter's necessity for sexual functioning. These ideas are discussed in the following section through reference to interviews with Michelle, Nick and Chelsea who talk about similarities and differences between gender reassignment surgery and cosmetic surgery in terms of public perception, techniques used, motives of clients and desired outcomes.

Michelle, a male-to-female transsexual interviewed in 1996, argues that gender reassignment surgery is cosmetic surgery. She then goes on to say that women and people who are transgendered/transsexual use cosmetic surgery technologies in order to feel more comfortable in their bodies:

Well yes it [gender reassignment surgery] is cosmetic surgery. In a very real sense it is quite the same thing. People undergo cosmetic surgery because they want to enhance something about themselves, and want to feel better about themselves in some way, or for whatever reason. Whether it is a face lift, or whether it is breast enhancement, penis enlargement or whatever, it is something connected to making their body more acceptable to themselves. That is no different, I don't really think, than gender reassignment surgery which is attempting to do the same thing, which is attempting to (a) make yourself feel

better about your body, and (b) perhaps it is a more significant thing, but then in turn make yourself feel better about yourself because of the fact that you are more comfortable in your body. The fundamental difference between the two is that people probably generally don't really want to hear if you enhance your breasts, or have a face lift, or whatever else, but there is this pretty horrific sense in a lot of people of the notion that people can actually have their genitals altered, or cut off, or whatever. It is a much more emotive issue than the simple face lift is.

Michelle, MTF, 1996

Michelle suggests that women who surgically alter their bodies are less reflexive about their cosmetic surgery decisions. However, transgendered people and women cosmetic surgery clients identified the expectations of other people as contributors to their eventual decisions to surgically alter their bodies. Both Michelle and Lucy (a woman whom I interviewed in 1991 who had a breast reduction so that she could feel OK about her breasts), suggest that 'elective' surgery is a way for them to be 'normal' so that they could feel more comfortable in their bodies. Michelle considers that, while the techniques associated with surgically modifying the body and the outcomes desired by clients may be the same, it is the site of the surgery (i.e. the genitals), and the sets of understandings which are attached to these forms of surgery, that make them different. Michelle indicates that the social stigma surrounding transsexualism, and transsexuals' use of sex reassignment surgery, makes cosmetic surgery decisions undertaken by women less problematic than those undertaken by people who identify as transgendered. Cosmetic surgery is not as emotive as gender reassignment surgery and this makes women who have cosmetic surgery less interesting to the general public than people who have gender reassignment surgery.

In the following interview extract Nick also argues that both gender reassignment technologies and cosmetic surgery involve 'changing gender'. For Nick, these technologies are about 'sculpting your body', he suggests that the difference is socially constructed:

SP: Do you think that people who have, or desire, gender reassignment surgery differ from people who have, or desire, cosmetic surgery?

No. No difference I don't think, either way it is still cosmetic surgery. Which ever way you look at it really you are changing gender. It is more socially acceptable for people to have face lifts and stuff like that. But to me there is no difference. It is no different than me, like I've had my nose done, admittedly for medical reasons but that is irrelevant, it is still plastic surgery and it is still cosmetic surgery. For me it is no different than going look I've had my chest

done. Basically you are sculpting your body, you have fat taken off you are sculpting your body, changing gender is sculpting your body. Simple as that and I don't think there is a difference. It is society that makes it a difference because it is OK to spend thousands of dollars on your face to make yourself look beautiful or whatever, but it is not OK to have gender reassignment surgery and be happy, I don't see that logic.

Nick, FTM, 1997

According to Nick gender reassignment, plastic surgery and cosmetic surgery technologies are similar as they all involve sculpting the body. Nick takes male hormones, he has had a rhinoplasty and a mammoplasty. He indicates that transitioning across binary gender categories is something that he works on daily – his body is an ongoing project. Chelsea also suggests that gender reassignment is a form of cosmetic surgery. She draws parallels between the motives of clients who engage in these technologies:

Nope, I don't believe that they differ at all from people who desire cosmetic surgery, and I consider gender reassignment surgery to be cosmetic surgery. It does not mean that it lacks import, that it is not important to me. It has to be cosmetic, by definition cosmetic is just changing the body in whatever shape you want, whether it is a breast lift, a face lift, or whatever. The ultimate result of that is to produce a situation where you can function better in society. And if other people think that bigger or smaller breasts help them function then so much the better. More power to them if they have got the money to do it so long as they know what they are getting into first.

Chelsea, MTF, 1996

Cosmetic surgery and gender reassignment technologies enable people to function better in their day-to-day lives. By suggesting that cosmetic surgery is not superficial and should not therefore be dismissed as 'frivolous' or 'unnecessary' (Young, 1990) Chelsea pre-empts a negative reading of her construction of both forms of surgery as 'cosmetic'. An awareness of the potential negative outcomes associated with medical intervention prompts Chelsea to present knowledgeability and informed consent as pre-requisites for action. While Chelsea agreed that gender reassignment surgery was similar to cosmetic surgery she also noted differences in relation to access and to fertility:

One difference I can think of is essentially that you have to go through a long process before you can get the surgery. That is you have to wait, living in the role of another gender having hormonal changes in your body. By the time that you get to have gender reassignment surgery you are already infertile. You cannot have children either way, because if you are going female-to-male then you have had a hysterectomy already and if you are going male-to-female you

have been on hormones so long you have no sperm count. So the main difference between other forms of cosmetic surgery and this is that you cease to be part of the reproductive gene pool. I know there are lots of men and women that are infertile, but genital reconstruction is sort of like a choice, infertility is a by-product of the process.

Chelsea, FTM, 1996

According to Chelsea access to privately funded surgery is easier for people who engage in forms of cosmetic surgery that are not associated with transitioning across binary gender categories. Cosmetic surgery involves negotiation between the surgeon and the client. In contrast MTFs who desire genital surgery, and FTMs who desire mammoplasty and/or hysterectomy, have to secure consent from a team of people – including a psychologist, an endocrinologist/physician and the surgeon (Findlay, 1995: 43). Chelsea characterises sex reassignment as a ‘choice’ in spite of all these medical gate-keepers, consequently the infertility that results from that process is social.

Differences between sex reassignment surgery and cosmetic surgery are discursively produced by the alignment of dualistic understandings about the relationship between sex, gender and anatomy with another set of oppositions based on assumptions about the normal/abnormal and the natural/artificial. Morgan (1991) and Hausman (1995) imply that the surgically modified bodies of women may be read as ‘artificial’ in relation to female bodies that are unaltered by surgery. Similarly, feminists, such as Raymond (1979), Lienert (1995) and Hausman (1995) suggest that the post-operative bodies of MTF transsexuals are ‘less authentic’ than the bodies of women. This category of ‘authentic’ women presumably includes those women who engage in cosmetic surgery who are defined as ‘artificial’ by Morgan (1991) and Hausman (1995). This suggests that feminist definitions of ‘natural’ and ‘artificial’ women may change depending on the reference point that is used to construct the ‘natural’. Generalisations about sex reassignment surgery and cosmetic surgery obscure rather than clarify the way that these discourses and practices are created and applied to the body. Distinctions between gender reassignment surgery and cosmetic surgery are based on assumptions that the boundaries constituting these two categories are fixed and unambiguous.

In New Zealand and Australia private plastic surgeons perform both aesthetic cosmetic surgery and sex reassignment surgery procedures. Clients who have or desire sex reassignment surgery may also have breast surgery, ribs removed and cheek

implants – forms of surgery that more commonly are associated with people who do not identify as transsexual/transgendered. This suggests that differences between these two forms of surgery are discursively constructed rather than grounded in any obvious differences in techniques or desired outcome. The difference between ‘legitimate’ cosmetic surgery and ‘illegitimate’ sex reassignment surgery is also apparent in research informants’ talk about these procedures. Jane thought that gender reassignment surgery was necessary and not ‘cosmetic’. In contrast, she characterises breast augmentation, cheek implants, rib removal and chin shaving - surgeries also associated with transitioning across binary gender categories - as unnecessary and therefore illegitimate. The following interview extract illustrates her position:

Jane: I don’t want the breast implants, dangerous, if my breasts grow to be a C cup, I’ll be a C cup, if they grow to be a B cup, I’ll be a B cup. The hormones are fixing up most of the other little body shape problems. The only thing I do really want to fix up is my ears, but that is just a normal thing that everybody hates something about them, mine are too big, they sit out too much, and I have always wanted them to sit back. Apart from that I don’t want to go and have like some of the things that people talk about having, like a couple of rib bones taken out, if you have got a problem with the rib bones, having the jaws redone and cheek bone implants, having them shaved and that. The vocal chords in the voice box I wouldn’t mind getting done because that is one of the main give-aways, and I want to be fully accepted as a woman, where you just couldn’t tell. I don’t see the desire to have surgery where it is not needed.

SP: What about women who do not have gender issues and have cosmetic surgery?

Jane: They just want to enhance their natural beauty, or get rid of something that is a problem to them, it might be they have got a big nose, they dislike their nose, if people stare at their nose they get their nose fixed up.

SP: Is that true for gender reassignment surgery that people are getting rid of something that is a problem to them? A body image problem or is it something more?

Jane: It goes deeper, because they (transsexuals) identify with the sex, it is not cosmetic, (they/women) want to make themselves look prettier. I want to make myself look more normal in relation to the person I identify with. Like I don’t want to get the breast enhancement, if I wanted to make myself look prettier, like big tits, and I don’t want that, I want myself to look normal. I don’t want to stand out as a gorgeous luscious super woman, I just want myself to be accepted as a woman every day. So I don’t agree that they are similar.

Jane, MTF, 1996

Jane considers gender reassignment to be more legitimate and necessary than cosmetic surgery because it is associated with an individual's sex. Jane does not agree with unnecessary cosmetic surgery. She defines necessary surgery as those procedures that will enable her to pass as a woman in her day-to-day life. For Jane, gender reassignment is about being 'normal' and 'accepted' every day whereas cosmetic surgery is done for reasons of vanity or beauty. Unlike gender reassignment technologies cosmetic surgery is not done so that people are able to be ordinary or normal (Davis, 1991, 1993). Jane's pre-operative identity is constructed through a fractured relationship between her corporeality and self. Gender reassignment is not antithetical to subjectivity. Instead it enables Jane to become an embodied subject by changing the relationship between her corporeality and her identity (Davis, 1993: 37). In the following narrative Angie suggests that cosmetic surgery clients and gender reassignment clients might have similar feelings about their bodies. Unlike gender reassignment surgery, cosmetic surgery to Angie involves 'butchering' and 'mutilating' the body. Cosmetic surgery is chosen freely; gender reassignment is not a choice but is essential:

If society was more accepting transsexuals like myself would still seek surgery because I don't want to be a woman with a penis. I don't think I have to be crazy to think that. If society was less rigid and it was acceptable, it was the norm for me to exist with a penis, I'd still seek reassignment surgery. I'll always be transgendered but I just want to normalise my life a little. Try and un-complicate it because I consider myself to be a straight female and I'm not able to experience that. I mean the majority of women who have their breasts done do it for a man more than they do it for themselves. They might do it a little bit for themselves but there is no way in the world that I would ever consider doing that to myself - butchering myself. Sex reassignment I don't consider to be mutilation. Gender reassignment is something that I have to do. Breast augmentation is not something that I have to do. But then somebody who wants breast augmentation that may be something that they have to do to feel good about themselves. They may have been flat-chested all their lives and they need to feel more of a woman to feel more accepted by society. I mean except for the bad press about breast augmentation cosmetic surgery is more acceptable than gender reassignment. Society does not have a problem with a woman making her breasts bigger, it is a patriarchal society anyway, most men have a large breast fantasy. Whereas gender reassignment isn't cosmetic surgery because it is fiddling with an area that people have a problem with because it is associated with sexuality.

Angie, MFT, 1996

Both Jane and Angie consider gender reassignment to be more acceptable than cosmetic surgery. Cosmetic surgery involves the unnecessary mutilation of the 'natural'

female body. These narratives sit alongside, and in tension with, talk about how identities may be engendered through surgical technologies. Jane and Angie suggest that authentic social identities depend on having particular types of bodies. Minds are disturbed by bodies that do not conform to normative sets of understandings about the relationship between sex and gender. As a result, the pre-operative bodies of MTFs are 'unnatural'. Sex reassignment surgery brings gender identity into line with the physical body. Angie suggests that the relationship between gender reassignment and sexuality makes the surgical decisions of transgendered people problematic.

While Jane and Angie distinguish between cosmetic surgery and gender reassignment surgery, most of the people I talked to agreed that gender reassignment is a form of cosmetic surgery. The narratives of transgender people often utilise essentialist understandings of gender while simultaneously breaking down and/or challenging these understandings. The field in which transsexualism is embedded opens up new spaces for doing gender and presents additional possibilities for looking at the ways subjectivities are engendered through lines of connection between gender, sexuality and embodiment. This suggests that instead of focusing on the medicalisation of transsexualism as a regulatory process, through which transsexuals are constituted as 'other' and in need of surgical intervention, it may be more productive to consider the different contexts in which transsexual surgery is both constraining and enabling as a regulatory discourse and as a way of constructing transitional bodies.

Connections and differences

In sum, I have outlined some of the key themes within feminist criticisms of the way gender is used in medical discourses and practices and I have also located transsexualism and sex reassignment surgery technologies inside these debates. Medical technologies for crafting gender produce and reproduce theories about the natural body and the social environment. Elective surgical technologies are based on the view that the body is a plastic and malleable commodity. They are shaped by heterosexual interests in ways that inevitably reflect certain gender relations and assumptions about sexual difference. I also argued that there are a number of connections between feminist analyses of cosmetic surgery and gender reassignment surgery. For example, many offer text-based analyses that focus on the actual modification of the body in ways that devalue how surgery may be used to craft identity. Both deploy a

problematic notion of the 'natural' body as that unaltered by surgery, thereby constructing a binary opposition between the natural pre-surgical body and artificial post-operative body. They imply, for example, that self engineered subjectivities are less authentic because of their essential relation to technology.

Feminist research into gender reassignment surgery needs to reinstate people who identify as transgendered as active and knowledgeable actors within the context of structured limitations (Davis, 1991: 33). People who have gender reassignment surgery make informed choices within the context of particular structural constraints. They are often aware of these constraints and the potential negative consequences of their gender reassignment surgery decisions. However, this knowledge is set in the context of the pleasures and possibilities that gender reassignment surgery offers. For many, gender reassignment will be an ambivalent experience. Therefore understanding why individuals opt for gender reassignment surgery necessarily involves recognising how those who are clients articulate their personal experiences of the constraining and enabling features of this surgical procedure. The people interviewed for this research described their gender reassignment surgery in terms of personal and physical transformation. Like women who had cosmetic surgery, they emphasise the sexual and psychological benefits that were associated with modifying their bodies.

In attempting to make sense of their worlds and experiences, the people interviewed bring a variety of analytical skills to the research conversation. In this chapter, and in the previous two chapters, research informants used knowledges about diversity to challenge stereotypes about transsexuals and to question the idea that genitals and social gender have to be consistent. They deconstructed the opposition between cosmetic surgery and sex reassignment surgery and opened up the possibility of resisting surgery for reasons defined as 'cosmetic'. Some of the people that I interviewed drew on feminist theories about male dominance and problematised personal history and experience. In short, their talk hints at the contradictions and ambiguities associated with constructing gender identities through the use of medical technologies.

The extracts from interviews with a range of different people who participated in this research also contained ideas or theories about the relationship between choice, action and consequence(s). Rather than suggesting that transsexuals are unreflexive in

their pursuit of sex reassignment surgeries, these narratives illustrate some of the dilemmas and difficulties surrounding their surgical decisions articulated by those with gender issues. These deliberations suggest that elective gender reassignment surgery is not a course of action that is taken lightly. Specifically, people made choices about surgery in the context of knowledge about debates over its use. The talk locates transsexuals' dependence on medicine in social pressures, questions the ethics of surgery and alludes to the risks associated with less successful surgery ('the surgery is not great at all', 'inadequate vaginal depth'). Rather than constructing transgendered people as cultural dupes of a rigid binary sex-gender system, these narratives suggest that the people interviewed are knowledgeable and strategic actors.

Exploring embodied citizenship

Registering identities, regulating bodies

At the very moment when genitals seem to display their full, unambiguous extralinguistic reality – when the language of one sex collapses – they also assume their fullest civil status, their fullest integration into the world of meaning...

Thomas Laqueur (1990: 139).

At the boundaries of gender categories, it seems, bodies may travel without passports granted by society

Bob Connell (1999: 454)

This chapter begins with a mundane artifact, a piece of paper on which the perfunctory details of a person's birth/identity are recorded, and traces the complex network of relations that go into its production. The birth certificate is embedded in multiple overlapping networks of social relations but for the purposes of this chapter I will restrict discussion to three: the Births, Deaths and Marriages Register, the legislation governing this register for recording a change of sex in New South Wales, and the birth certificate itself. The full birth certificate is the state's original record of a person's name, sex, nationality, parentage and date of birth from which subsequent documents such as passports are generated. The birth certificate is an artifact generated by the Births, Deaths and Marriages register. The register acts as a bridging device (Latour, 1995) between the birth certificate, the individual and the state. Registers are an important way in which states regulate citizens (Phibbs, 1994; Austrin and Phibbs, 1996; Phibbs, 2000). The way in which registers are implemented and used, however, has been largely neglected by social theorists working in the area of citizenship and body politics. In the area of citizenship theory Rogers Brubaker (1992: 21), for example, argues that 'the modern state is not simply a territorial organisation but a membership organisation, an association of citizens'. Brubaker does not explore how modern states attempt to monitor and administer this membership through administrative practices.

Biological sex, like citizenship, is an enduring personal status ascribed at birth. In Australia, ascription of state citizenship determines the rules for recording sex at birth and for recognising subsequent gender identity. In this chapter I argue that the complex sets of relations that enable states to distinguish between unconditional sexed identities and conditional sexed identities, are performed in and through the use of the Births, Deaths and Marriages register.¹ In this view, the register is an attempt to make all of the complex elements associated with citizenship and biological sex homogeneous in electronic and geographical space.² I argue that variations in policies and practices, relating to altering the sex designation on the birth certificate, within and between Australian states means that administrative distinctions between male and female bodies are complicated by the corporeal diversity and personal histories of transgendered individuals.

Moria Gatens (1996: 8) argues that the imaginary body embedded in state policies and practices is not neutral. Instead it reflects and reproduces binary notions of sexual difference that are embedded in cultural values, images, symbols and representations. Gatens does not explore how these inequitable bodies are reproduced within the administrative apparatus of the state. This Chapter connects Gatens' arguments about the body politic with contemporary debates in the area of 'sexual' or 'intimate' citizenship (Evans, 1993; Plummer, 1995; Bell, 1995; Stychin, 1998; Weeks, 1998; Sullivan, 2000). According to Gatens the neutral body on which state politics are based is in fact a male body. Gatens suggests that women's bodies remain problematic whenever they differ from the body politic.³ I argue that the body politic is represented by a particular kind of imaginary male body; or to put it another way, it is not only women's bodies that problematise the body politic but any body, male or female, that

¹ Distinctions are made between citizens who are born within the territorial borders of a nation-state and those who are not – for example permanent residents. The sex designation on the birth certificate of a post-operative transsexual is regulated by the laws governing change of sex in his or her country of birth. Citizens who are born in New Zealand, for example, which recognises change of sex for post-operative transsexuals, are able to change all of their official documents – birth certificate, passport etc. People who have become New Zealand citizens but who were born in the UK, for example, which does not recognise change of sex for post-operative transsexuals, are unable to change the sex designation on any official documents that rely on the UK birth certificate. New Zealand born citizens, who are post-operative transsexuals, have an unconditional right to their gender identities. Non New Zealand born citizens do not.

² Electronic space refers to the uniform organisation of information in a computerised register/statistical database. Geographic space refers to the actual physical territory from which the Births, Deaths and Marriages register draws its information about the population.

³ Gatens (1996: 24) argues that 'our legal and political arrangements have man as the model, the center-piece, with the occasional surrounding legislation insets concerning abortion, rape, maternity allowance, and so on. None of these insets, however, take female embodiment seriously. It is still the exception, the deviation, confined literally to the margins of man's representations'.

does not mirror it. State legislation relating to the regulation of transgender bodies and identities is used by way of example to explore how sexed identities are regulated by a modern state. One reading of the New South Wales legislation that allows post-operative transsexuals to change the sex designation on the birth certificate is that surgery and reproductive non-functioning are important to the way that the state regulates or authorises transgender bodies/identities. Debates within citizenship theory tend to focus on the territorial or hereditary construction of citizenship (Brubaker, 1992). I explore the national and local construction of citizenship in Australia by looking at the way that citizenship is constructed through the territorial/reproductive regulation of sexual difference.

The New South Wales legislation that enabled post-operative transsexuals to change the sex designation on their birth certificate came into effect in conjunction with the Transgender Anti-vilification Act on October 1, 1996. Both sets of legislation were the result of five years of co-operative political lobbying by the gay, lesbian and transgender communities. For many people in the Sydney-based transgender community the reforms represented long overdue state recognition of transgender and transsexual identities.⁴ Others considered the reforms to be a compromise that maintained the status quo.⁵ In this case state recognition of transgender bodies and identities is incorporated into existing policies and practices through administrative strategies that attempt to maintain dualistic understandings of sexual difference. The legislation governing the Births Deaths and Marriages register, that allows the sex designation on the birth certificate to be changed, is a new instrument of bio-power (Foucault, 1978: 140) and potential source of division and differentiation among transgendered people.

Nations have been historically constituted in gendered and sexualised terms (Stychin, 1998: 7). In New South Wales “sexual citizenship” for post operative transsexuals is constituted through the consumption of gender reassignment surgeries. State legislation that allows post-operative transsexuals born in New South Wales to change their sex on their birth certificate constructs a local citizenry that is related to

⁴ Peter Weekes, ‘Victory at last for state’s trans’. Q, 192, 7/07/96.

⁵ Rachel Toft argues for example, that the reforms are a hollow victory for the transgender community – as continuing to exclude post-operative transsexuals from marrying enables the New South Wales Government to avoid its own Transgender Anti-vilification Laws. She also points out that the disjunction between state and federal legislation means that transsexuals are still not able to ‘live legally as normal’ (Letter to the Editor, Polare, 14, 1996, p 4).

territorial-based birth-right. Only those individuals born in New South Wales are able to take full advantage of this legislation; transsexuals born in other Australian states and living in New South Wales are excluded by this legislation. Instead the official documentation relating to their sexed identity is governed by state legislation based in their territory of birth. In other words, this concept of citizenship is constituted through a series of exclusions. I argue that in New South Wales transsexual identities and rights are constructed in terms of the legislation, which specifies which categories of people may officially change their gender and under what conditions.

Registering sexed identities

The law recognises only two sexes – male and female – and requires the decision assigning sex to be made when the infant's sex, determined by genital anatomy, is entered on the birth certificate. Yet the designation of sex, decided in a split second, may have a profound effect on the individual's future development... You cannot choose not to be classified sexually as either male or female; the choice made for you at birth operates in all areas, for all purposes, for all time... (Dunderdale, 1992: 23).

The full birth certificate is the state's archive of an individual's identity. It ties an individual, however tenuously, to a particular place/community/nation and does not lapse with either temporary or permanent absence (Brubaker, 1992: 21). It is the original record of a person's name, sex, nationality, parentage and age from which subsequent documents such as passports are generated. The birth certificate records date and place of birth and name of parent/s in order to establish certain rights to citizenship and the inheritance of property.⁶ The recording of the sex of an infant at birth confers a gender identity. The sex, once recorded on the birth certificate, determines institutional and social inclusions and exclusions; in this regard biological sex is a form of (heterosexual) social closure.

Rodgers Brubaker (1992: 29-30) argues that all forms of social closure include some way of defining and identifying 'outsiders or ineligible'. Insiders and outsiders may be defined informally through tacit, internalised criteria deployed in social interaction or formally by specialised administrators. Formal techniques for the definition of insiders and outsiders include:

⁶ In Australia inheritance rights are regulated by state. In New South Wales definitions of 'descent' and 'descendants' for the purposes of inheriting property are outlined in the Inheritance Act of 1901 (www.lawlink.nsw.gov.au).

the elaboration of explicit and unambiguous criteria of insiderhood and outsiderhood; exhaustive enumerations of individual insiders or outsiders (guest lists, *registers*, rosters, membership rolls, blacklists); and formally administered identification routines in which a particular person is identified as an insider or outsider through the application of general criteria or through matching against enumerative lists (Brubaker, 1992: 30 *italics my emphasis*).

Socially defined biological sex⁷ is an 'instrument of closure' (Brubaker, 1992: 31) in the sense that the state administered categories of male and female determine life choices by enabling individuals to participate in certain social interactions and not others. Biological sex is also an 'object of closure' (Brubaker, 1992: 31), a legal status to which states restrict access. The construction of male and female as general, abstract and enduring concepts enables states to use them as administrative categories. The birth certificate and the Births, Deaths and Marriages register are the formal mechanisms for recording the sexed identities of particular individuals.

The single piece of paper on which the details of birth are printed is the outcome of a series of translations in which individuals become symbols and codes that are able to be conserved both individually and collectively in official records. The sex designation on the birth certificate divides people into two mutually exclusive categories, male and female.⁸ The vast majority of people fall easily into these either/or categories, but some people are neither or both. Every state requires that a person's biological sex is entered onto their birth certificate. The vast majority of people acquire their biological sex in this way. Sex is an ascribed status determined at birth - in the majority of cases biology is unambiguous allowing states to maintain relatively clear administrative records. Some individuals will be assigned incorrectly, in the sense that their subsequent gender identity may not correspond to the sex recorded at birth (see Brubaker, 1992: p31-32). This ambiguity between sex at birth and subsequent gender identity allows for variation in state's ascription rules. It is the way that states manage this variability that is of interest in this chapter.

⁷ In cases where the external genitalia of the new born infant are unambiguous the biological sex of an infant is often determined through the judgement of the attending medical specialist (Findlay, 1995: 36-37). In many of these cases it could be argued that the sex of the infant is defined according to cultural, as opposed to diagnostic, criteria, the point being that biology/genetic sex (XX, XY, XO, XXY etc) is not the basis on which the 'sex determination' at birth is usually made. Rather it is made on the basis of the visual judgement of the doctor or midwife. This suggests that biology is socially defined on the basis of physical sex. In addition, the genuine hermaphrodite is biologically male and female but the birth certificate will state only one or the other.

⁸ See Chapter Six for a discussion of critiques of the two sex model.

The Births, Deaths and Marriages register creates identity categories (national, state, sexual, sexed identities), establishes citizenship and allocates inheritance rights. The register is organised in gendered and sexualised terms – the sex designation on the birth certificate, for example, is incorporated into federal marriage law thereby establishing which sex an individual is permitted to marry. Such legislative inclusions and exclusions rest on the presumption of heterosexuality and its implications vis-a-vis marriage, pro-creation and family (Evans, 1993: 203). The register not only functions as a centralised mechanism for recording births, deaths and marriages, but it may also be used to smooth over competing claims within a contested field. The birth certificate generated through the register may be used to determine sex for the purpose of marriage or establish proof of parentage/marriage for inheritance purposes. The Births, Deaths and Marriages register confers rights and shows up differences between people living in the same state. One of the functions of the Births, Deaths and Marriages register is to establish legitimate membership to a local/national community and thereby confer rights associated with citizenship.

Modern citizenship is typically defined as ‘a personal status consisting of a body of universal rights (i.e., legal claims on the state) and duties held equally by all legal members of a nation-state’ (Marshall, 1964; Brubaker, 1992 cited in Somers 1993: 588; Turner, 1994). Citizenship may be thought of as a social or relational network, a moral and political category, as a formal legal or civil status, and as an administrative category (Mische, 1996; Lister, 1997: 29; Weeks, 1998: 38; Hudson and Kane, 2000: 5). Citizenship is about rights and obligations (Lister, 1997) - legal recognition; equal treatment before the law and equal political participation have been the traditional cornerstones of citizenship (Evans, 1993: 100; Weeks, 1998: 37-38; Sullivan, 2000: 156). Current claims to citizenship by people who identify as transgendered in Australia (and elsewhere) follow patterns in the extension of equal political citizenship rights over time to unpropertied men, women, people of colour and sexual minorities (Plummer, 1995: 146; Somers, 1993; Weeks, 1998). Jeffrey Weeks (1998) comments on the connections between universal citizenship, sexual citizenship and the state regulation of bodies:

New stories about the self, about sexuality, and gender, are the context for the emergence of the sexual citizen because these stories telling of exclusion, through gender, sexuality, race, bodily appearance or function, have as their corollary the demand for inclusion: for equal rights under the law, in politics, in economics, in social matters and in sexual matters. They pose questions about who should be in control of our bodies, the limits of the body, the burden of custom and of the state (Weeks, 1998: 47).

In contemporary Western societies the differential extension of citizenship to people on the basis of class (Weeks, 1998), gender (Lister, 1997), ethnicity (Yuval-Davis, 1997) and sexuality (Richardson, 1998) point to the embodied dimensions of citizenship. Many of these categories were/are at one time or in certain national contexts ascribed at birth.⁹

Australians are dual citizens as both members of a nation and a state (Irving, 1997: 159, 162; Hudson and Kane, 2000: 4). Their civil status is determined in their 'state of origin'. Birth registers and the issuing of birth certificates, for example, are the responsibility of states (Dunderdale, 1992: 22). This dual citizenship status enables states to impose regulations on people born within its territories independently of the national federal government (Irving, 1997: 159,162). In addition, passports and regulations surrounding marriage are the responsibility of the federal government. The local organization of the Births, Deaths and Marriages register potentially poses problems when the regulation of the register between states and between states and the federal government is not consistent. Discontinuities between states that recognise 'change of sex' and states and federal legislation that currently do not, means that liberal states have had to incorporate these differences into their legislation. It is the incorporation of these differences into the New South Wales state legislation that makes the use of the birth certificate context-bound.

State citizenship determines the rules for recording sex at birth and for recognising subsequent gender identities. From the age of 18 an unmarried person born in New South Wales whose gender identity varies from that ascribed at birth may be able to acquire legal recognition of their subsequent gender identity. Rules governing the change of sex across Australian states can be more or less restrictive. In New South Wales, South Australia and Australian Capital Territory the ability to change the sex designation on the birth certificate is open to all candidates who meet certain

⁹ Class in Elizabethan England (Garber, 1998 [1992]: 178) and ethnicity in apartheid South Africa for example.

conditions. Local state regulation of transsexual identities and rights has resulted in widely varying legislation that specifies which categories of people may officially change their gender and under what conditions. South Australia was the first Australian state to pass legislation (in 1988) that enabled transsexuals born in South Australia, who had undergone sex reassignment surgery in South Australia, to alter the sex designation on their birth certificate. It could be argued that this legislation was aimed at regulating sex reassignment surgery rather than extending citizenship rights to post-operative transsexuals. The legislation stipulates that only sex reassignment surgery performed in a South Australian hospital by medical professionals who are accepted medical specialists in this field may be recognised for the purposes of altering the sex designation on the birth certificate.¹⁰ A transgendered person, born in South Australia, who has sex reassignment surgery outside of South Australia cannot alter their birth certificate.¹¹ This legislation is largely symbolic as no sex reassignment operations are currently performed in South Australia (Perkins, et.al., 1994: 15). At the time of writing no other Australian state has incorporated these restrictions into law. In other Australian states such as Tasmania and Victoria the ability to make the changes to the sex designation on the birth certificate currently remains closed.

The operation of the Births, Deaths and Marriages register in any state is set by state government policy that determines the conditions under which births are recorded and their details altered. A one page fact sheet for recording a change of sex issued by the New South Wales Registry of Births, Deaths and Marriages in 1996 outlines the criteria under which a transgender person qualifies to 'record their new gender on their birth certificate'. For the purposes of the arguments presented in this chapter it is worth reproducing this fact sheet at length:

From the 1 October 1996 people born in NSW who have undergone sexual reassignment surgery will be able to apply to the Registrar to record their new gender on their birth certificate.

A person born in NSW who is 18 years or older may apply to the Registrar to have the record of their sex altered on their birth certificate if they are not married and have undergone sexual reassignment surgery.

An application to have birth certificate records altered must be accompanied by statutory declarations by two (2) doctors verifying that the applicant has undergone

¹⁰ This legislation resulted from doctors' concerns about MTF transsexuals who had sex reassignment surgery in third world countries ('good tranny guide' <http://host2mbcoms.net.au/tg>).

¹¹ www.gendercentre.org.au and the 'good tranny guide' <http://host2mbcoms.net.au/tg>.

sexual reassignment surgery, as well as other documentation certifying the identity of the applicant...

Birth certificates will not be marked in any way as to indicate that the person has changed sex, although to enable your old birth certificate to be issued as necessary, the birth will be re-registered in the current year.

The new certificate can be used in NSW and other places which recognise change of sex (such as South Australia). Where change of sex is not recognised s 32G requires that you tell the person relying on your new birth certificate of the circumstances it has been reissued, or to use your old birth certificate instead...

The child of a person whose sex has been altered can apply for their parent's original birth certificate to establish inheritance and citizenship rights.

(NSW Registry of Births, Deaths and Marriages – undated)¹²

In New South Wales state legislation allows post-operative male-to-female transsexuals born in New South Wales to change their sex on their birth certificate. Female-to-male transsexuals are required to have a hysterectomy in order to qualify under the same legislation. The regulations position medical professionals as key actors in securing the right to change the sex designation on the birth certificate. In order to conform to the regulations regarding a change of sex the body needs to go through a series of translations. For male-to-female transsexuals the construction of female genitals, which induces reproductive non-functioning qualifies them as female. For female-to-male transsexuals reproductive non-functioning in the form of a hysterectomy qualifies them as male. One reading of this legislation is that both surgery and reproductive non-functioning are important to the way that the state regulates transgender bodies. Another interpretation of these surgical requirements suggests that the state legislation leaves post-operative transsexuals with no biological sex – only gender.

The New South Wales regulations attempt to ensure consistency in the recording of sex on the birth certificate. It should not be possible for a woman with a penis to father a child or a man with a vagina to give birth. Individual histories, however, may thwart attempts to construct consistency. In New South Wales an individual with their original birth sex recorded as male may potentially appear on the register as a male/son, a married man, a father, a divorcee and a female. The restriction of marriage to people of opposite sex, whereby biological sex at birth is prioritised over subsequent

¹² I acquired this fact sheet in 1996/97 while in Sydney. The fact sheet was probably produced sometime between the passing of the Transgender Anti-Discrimination legislation on June 19, 1996 and the day of commencement on October 1, 1996. A revised version of this fact sheet is also reproduced on the New South Wales Government website (www.lawlink.nsw.gov.au).

gender identity (Dunderdale, 1992: 24 & 25), means that a MTF transsexual cannot be entered on the register as a married woman.¹³

In principle the sexed identity of a post-operative transgender person endorsed on the changed birth certificate is meant to apply relatively independently of local context. But at the inter-state and national level the birth certificate is context bound. Tensions between public narratives of biological sex as general, abstract, and enduring and the way in which transgender identities are local, specific and changing is demonstrated in the way in which both birth certificates are used both within New South Wales and between New South Wales and other Australian states. Heterosexual male and female citizens enjoy the unconditional right to their sexed identity and they may organise their lives accordingly. The gender identities of transsexual people are never unconditional. In New South Wales pre-operative and non-operative transsexuals are excluded from formal legal recognition of their chosen gender identity by the state. But even those who are post-operative, and have had the designation on their birth certificate changed, are subject to their old identities under certain circumstances. With respect to sports competitions, superannuation,¹⁴ private education and marriage, an individual's original birth certificate applies.¹⁵

A person who secures a change of sex has two birth certificates: their original birth certificate and the new birth certificate registering the change of sex. In order to distinguish between the two birth certificates the birth is re-registered in the year in which application to change the sex designation on the birth certificate is successful. This means a person who alters the sex on their birth certificate at age 40 will have a registration date on their new birth certificate, and a catalogue number, that does not approximate the date of birth that is recorded on the new certificate. This disjuncture between the (original) date of birth registered on the new birth certificate and the re-issued certificate's registration date and catalogue number means that an observant person may question the authenticity of the birth certificate requiring an explanation

¹³ www.lawlink.nsw.gov.au. Dan Hogan of the Department of Births Deaths and Marriages is quoted in a newspaper article as saying "Under Commonwealth law, this sort of marriage (between a tranny and a person of opposite gender) does not exist, so this form of marriage would be immediately null and void". Catt, Julie (20.06.96) 'Surprise reactions to tranny victory' in SSO, no. 308.

¹⁴ In Australia the legal age of retirement from paid work for women is 60 and for men 65. In 1999 a legal decision (in the case of the Secretary, Department of Family and Community Services *vs* SRA) was made that the sex at birth determines retirement age for the purpose of receiving social security benefits (www.austlii.edu.au).

¹⁵ Not all private educational institutions or sporting bodies exclude transgendered people, however, if they wish to do so this form of discrimination is not illegal.

for this discrepancy that would 'out' a transgendered person. Transsexuals who travel across the state border are required to inform the person relying on their new birth certificate of the circumstances surrounding its alteration. The legislation within that state may require them to reproduce their old birth certificate. The federal government does not currently recognise change of sex for post-operative transsexuals. Australian passports are an international record of national citizenship and personal identity that are administered by the federal government. As a result, the sex designation on the passport of a post-operative transsexual, born in New South Wales records the person's original sex at birth. A child of a person whose sex has been altered may also acquire their parent's original birth certificate in order to establish inheritance and citizenship rights. In this example, the birth certificates act as an archive for the conservation of traces of a previous identity that establishes a reversible route (Latour, 1995) which enables movement backwards and forwards through space and time from differently sexed bodies to paper.

Management tools and surveillance mechanisms

The New South Wales legislation is based on an assumption of consent; in the first instance consent to radical surgery and in the second consent to changing the sex designation on the birth certificate. In practice, although discourses of consent are used to regulate change of sex on the Births, Deaths and Marriages register, issues of consent become secondary to the way that the register is actually implemented and used as a management tool and as a surveillance mechanism (Austrin and Phibbs, 1996). This contrast between discursive claims and actual practice raises questions about how registers are managed and used and in whose interests. The deployment of the regulatory functions for the change of sex on the birth certificate may be seen as an example of bio-power in action (Foucault, 1978: 40). In this view the Births, Deaths and Marriages register is the apparatus for the administration of bodies and regulation of the sexed identities of the population in general and transgendered people in particular. The altering of an individual's biological sex on the birth certificate is regulated by formally articulated norms and enforced by state actors employing formal administrative regulations and identification routines. The surgical requirements are formal, as the surgery/genitals are invisible in ordinary public interaction and 'visible only under the special lens of administrative scrutiny' (Brubaker, 1992: 30). Changes to the sex at birth recorded on the register requires 'an administrative apparatus of classification and surveillance and a corresponding body of administrative knowledge'

(Brubaker, 1992: 30). Sophie, a pre-operative male-to-female transsexual interviewed in Sydney describes the process of changing her name on the birth certificate and other official papers such as her driver's license and passport:

When I changed my name I did it down at the Births Deaths and Marriages at Westmead. I had no problems there... [Once] I got the birth certificate changed, although it still tells them what my old name was with an endorsement thing on the bottom and still got the sex as male, because I have not had reassignment surgery. I think if you have the reassignment surgery that could change to female. But whether there is still an endorsement on it I don't know. But in my case all I have changed is the name, passport still has male, driver's license, all I changed was the photo and that is it. I have had a few hassles, mostly with Government Departments getting your name changed. They tend to be a bit more hassle than private industry. A couple of insurance companies I had to get my name changed, no problem at all. Passport office I had the biggest hassles with. Although you can't prove it, it was probably some smart-arse bloke there giving me the wrong information, I kicked up a bit of a fuss in the end and got it resolved. But you still have to kick up a fuss, you can't just go "these are the papers, I just want to change it".

Sophie, MTF, 1997

Sophie, a pre-operative transsexual, talks about some of the administrative differences between pre-operative transsexuals and post-operative transsexuals within the New South Wales legislation. Pre-operative transsexuals cannot alter the sex designation on the birth certificate and they have the original name recorded on the birth certificate and the change of name entered as an endorsement. Post-operative transsexuals, who change their name and sex designation on their birth certificate, do not have their original name recorded on the reissued birth certificate. The birth certificate does have an endorsement indicating that the birth certificate was previously issued under a different name but the name is not stated. This statement, combined with the absence of a former name, and the date of re-issue was described to me by one inter-sex person as a 'give-away to people who know what to look for'.¹⁶ In this example, a person's name has both personal significance and legal standing. Transsexuals, such as Sophie, change the name on the birth certificate so that it reflects their gender identity and it is the state's formal record of an individual citizen.

A register establishes specific kinds of relational-networks that facilitate the organisation of actors vis-à-vis each other in ways that provide the means for certain

¹⁶ Personal conversation with an inter-sex person who was born in New South Wales and had changed their birth certificate within 4 months of the legislation being passed (June 2001).

things, such as biological sex, to become knowable. This information is not given; it has to be worked out through forms of inscription collected and represented in a register. The register is central to the organisational and regulatory functions of states – it is one of the key mechanisms through which citizenship is established and whereby populations achieve durability. In this view the Births, Deaths and Marriages register operates as a management tool for the organisation of citizenship, identities and their associated rights. It is a centralised register administered and funded by the New South Wales government. The register is used conventionally as a means of classifying information and constructing identity categories. In this regard the register is implemented and used as a management tool and as a surveillance mechanism. Elizabeth Grosz (1994) also argues that bodies and identities are fashioned through and by regulations and techniques of surveillance that are culturally embedded:

The body is involuntarily marked, but it is also incised through “voluntary” procedures, lifestyles, habits and behaviours. There is nothing natural or ahistorical about these modes of corporeal inscription. Through them bodies are made amenable to prevailing exigencies of power. They make flesh into a particular type of body. Culturally specific grids of power, regulation and force, condition and provide techniques for the formation of particular types of bodies (Grosz, 1994: 142).

State legislation surrounding changing sex on the birth certificate is a ‘culturally specific grid of power’ that condones the construction of flesh into particular types of bodies. In New South Wales sexed citizenship for post-operative transsexuals is constituted through the consumption of gender reassignment technologies. Female-to-male transsexuals need to prove that they have undergone a hysterectomy. Male-to-female transsexuals have to prove that they have had sex reassignment surgery. Within this legislation, transgender people are identified with the body in so far as the body is understood as the site of these inscriptions. Transgendered people, homosexuals (Rubin, 1998 [1984]; Evans, 1993; Moran, 1999) and (intellectually) disabled people (Meekosha and Dowse, 1997: 56; Munford 1995) as ‘other’ within the body politic, attract state interventions that would not be tolerated in other areas of social life.

Modern citizenship as uneven and exclusive

The Births, Deaths and Marriages register makes possible new forms of visualisation based around the organisation and transfer of information through time and space. The register not only functions as a centralised mechanism for the recording of sexed identities, but may also be used to regulate and organise populations, spaces and times. The organisation of the population through forms of inscription collected and represented in a register hinges around the territorial regulation of citizenship.

Margaret Somers (1993: 587) argues that 'varying patterns of institutional relationships among law [sic], communities, and political cultures were central factors in shaping modern citizenship rights'. Somers explores citizenship as an instituted process rather than as a status. She argues that citizenship rights tend to be extended unevenly, depending on particular configurations of legal infrastructure, varying degrees of community capacities for participatory association, and patterns of political culture. As a result modern citizenship was achieved unevenly. Her focus is on differences in the historical emergence of citizenship rights among a heterogeneous working class in 17th and 18th century rural and pastoral England. The patterns that she identifies also apply to the differential or uneven extension of transgender citizenship rights to transsexuals in late 20th century Australia.

While Margaret Somers (1993: 587) contends that modern citizenship was unevenly achieved, Rodgers Brubaker (1992: 21) argues that citizenship is internally inclusive. Contradictions in the regulation of transgendered bodies and identities within and between Australian states suggest that citizenship is not internally coherent, nor is it evenly distributed. To paraphrase Brubaker's argument about differences in citizenship status between people born in a particular territory and those who are not, '(t)here is a conceptually clear, legally consequential, and ideologically charged distinction between' (Brubaker, 1992: 21) male and female born heterosexual citizens and those who are not. 'Closure pivots in each of these cases on the legal institution of citizenship' (Brubaker, 1992: 23). The uneven distribution of citizenship rights in a modern, democratic state may be seen in patterns of difference that are embedded in the regulation of transgendered bodies and identities. Differences in citizenship status between 'ordinary' citizens and transsexuals within New South Wales are further complicated by legal/legislative distinctions between post-op, non-op and pre-op transsexuals. Dissimilarities between the regulation of transsexual bodies and identities

between New South Wales, other Australian states and territories, and the federal government also impact on the rights of transgendered people living in New South Wales. In these examples the continuing use of binary gender categories in federal and state policies and practices discriminates against transgendered people.

The legislation reflects differences between the regulation of transsexual bodies between New South Wales, other Australian states and territories, and the federal government. State legislation relating to the regulation of transgender bodies illustrates how sexed identities are managed by a modern state. In New South Wales surgery and reproductive non-functioning are important to the way that the state regulates or authorises transgender bodies/identities. The territorial regulation of sexual difference is illustrated by the contradictions within the legislation in New South Wales and between New South Wales and other Australian states. This concept of citizenship is constituted through a series of exclusions. In Australia transsexual identities and rights are constructed in terms of widely varying legislation which specifies which categories of people may officially change their gender and under what conditions.

Post-operative transsexuals, born in New South Wales, who have altered the biological sex on their birth certificate do not enjoy the unconditional right to their chosen sexed identity. Differences between the state and federal legislation mean that in marriage and in superannuation the state's original record of an individual's biological sex applies. If they travel or move out of New South Wales they are also subject to the state's original record of their biological sex if the state in which they are located does not recognise 'change of sex'. The Act distinguishes between post-operative transsexuals living in New South Wales who were born in other Australian states and those who were born within its territory. In this regard, the legislation marks out a form of territorial citizenship based on the local recording of sexed identities on the Births, Deaths and Marriages Register.

Differences in the regulation of transsexual identities within and between Australian States are also complicated by differences between Australia and other countries. In the following narrative Nick, a tranny boy, talks about how the female designation on his passport, combined with the thought of being body searched, act as barriers to international travel:

The only reason I have not left Australia is because of my passport. I have not got a passport, but if I had a passport before the legislation, let's say I got one last year, it would have female on it. Now can you imagine me going through customs in America female? Don't think so. I wasn't prepared, look we all put ourselves in situations where we are vulnerable, and the key to success with transgenderism is you do not put yourself in those situations. Easier said than done, I know, but you have got to think before you act, because it can come back at you time and time again. When people have a go at you it is tough, real tough. It really hits you, you can get worn down to nothing. And it eventually does get to you, and the idea is not to put yourself in those situations. That is why I got involved with the legislation...

Nick, FTM, 1996

In Australia pre-operative transsexuals are classed on their passport in relation to their birth sex; in New Zealand pre-operative transsexuals have the option of not having their sex designation recorded on their passport – that is a line is put through the male/female category on the passport.¹⁷ One reading of the New Zealand legislation would suggest that it deconstructs binary sex/gender categories as a person may 'opt out' of any sex. Another more conservative reading of this option would suggest that 'opting out' maintains the integrity of normative understandings about the relationship between anatomical sex and social gender.

Peter Read (1998: 173) explores contradictions embodied in intersections between national and local legislation for Australia's indigenous peoples in ways that are relevant for an analysis of legislation relating to officially changing gender. He argues that historical variations in distinctions between indigenous and non-indigenous people within and between federal legislation and state policies and practices have effectively redefined indigenous Australians out of existence.¹⁸ His arguments could also be applied to variations in national and state policies relating to transsexuals. The legislation that allows transsexuals to change their birth sex enables some people who were transgendered to no longer identify in this way. The challenges of the category

¹⁷ New Zealand information based on personal conversation with a transgendered friend in New Zealand. Australian information see www.gendercentre.org.au and the 'good tranny guide' <http://host2mbcoms.net.au/tg>.

¹⁸ Read (1998: 169-170) cites the following example: '[t]he New South Wales Aboriginal Board were ordered to remove children from their parents, but then if possible, to persuade the Department of Child Welfare to receive the children into its – not the Board's – institutions. That is, a child was to be removed because, and only because, she was Aboriginal; but the moment after removal she was to cease to be Aboriginal.' Read (1998: 170) refers to this and numerous other legislative examples like it as 'extinction by legislation'. Eve Kosofsky Sedgwick (1990: 69-70) also notes that a series of legal rulings in the United States in the 1970's and 80's dictated that homosexuality was not a public concern. But findings against gay men and lesbians based solely on their sexuality suggested that homosexuality did not exist solely in the private sphere either. Sedgwick argues that these legal double binds oppress and discriminate against gay men and lesbians by undermining their identities.

transgendered are diminished through the (legislative) technique of redefining the other out of existence. Transsexuals who desire state authorisation of their sexed identity on their birth certificate have to fit themselves back into the mainstream society by divesting themselves of old cultural norms and parts of their bodies and acquiring new ones. State recognition of transgender identity is conditional and transgender people who do not fulfil these criteria are excluded from recognition. Pre-operative and non-operative transsexuals as well as hermaphrodites are differentially positioned vis-à-vis these regulations – in this sense the regulations permitting transgender people to alter the sex on their birth certificate are marked by another form of social closure. Or to put it another way, the legislation works best in relation to stereotypical heterosexual identified post-operative male-to-female transsexuals. Wendy a MTF interviewed for this project observes that the distinctions between pre-operative and post-operative transsexuals within the legislation, and its failure to fully incorporate transgenders, are a potential source of cleavage within the community:

When the legislation was passed everyone was pleased about its success although there was a lot of carping from one sector of the transgender community about the fact that the Bill discriminates between transgenders and transsexuals. Things like the fact that a transgendered person is not allowed to change their birth certificate, these compromises were made to get the legislation through, to include transgenders, the New South Wales parliament couldn't or wouldn't go that far, and then no one would have benefited. But that really is not important anyway because once the Transgender Amendment Bill is on the books you can work to get the Bill amended to include transgenders. The state recognition of transgender is the important thing, that official validation of our existence and our rights.

Wendy, FTM, 1996

Wendy indicates that while transgendered and transsexual people are recognized in the New South Wales anti-discrimination legislation (an international first), it is only post-operative transsexuals that are allowed to change the sex designation on their birth certificate. Transgendered people are differentially positioned vis-à-vis the surgical technologies that are incorporated into the Act. The draft legislation required transsexuals to have under-gone gender reassignment surgery in order to change the sex designation on their birth certificate. This prompted Nick, a female-to-male transsexual, to 'come out' in order to get the legislation modified to cater for the different bodies of female-to-male transsexuals:

That is why I got involved with the legislation... I've lost jobs because I'm a tranny. So I thought fuck this I'm going to do something about it so I came out, got involved with the legislation, went and saw this politician, spun him right out. Because with this new law it is only if you have had a sex change that you can get a change, well we don't have that availability. Well we do, but it is only in its experimental stages and it is a hard enough decision to have bottom half surgery, regardless for whether it is a boy or a girl. But for the boys they have to choose whether they want one they can piss out of or fuck with. Say you choose to have the sex, and it won't work. You are going to be thinking for the rest of your life I should have taken the other one and vice versa. Why can't they come up with something that does both? Because it is harder to work with something that you have not got, than to change something you have (as in MTF surgery). With the guys it is hard to create something out of nothing, so why should we be crucified (politically) for the inadequacies of the medical profession? We got the legislation passed with the fact that you have to have had your sexual organs done, with tranny guys that is a hysterectomy so basically all a guy has to do is have a hysterectomy and he should have no problems. If he does not choose to have a hysterectomy, or he does not need to have one, like in Andrew's case he has already gone through menopause, he doesn't really need one there are certain avenues for that.

Nick, tranny guy, 1996

Differences between the rights of post-op, non-op and pre-op transsexuals are also embedded in the New South Wales legislation. In New South Wales pre-operative and non-operative transsexuals are excluded from formal recognition of their chosen gender identity by the state. The legislation enabling recognised transgender people to alter the sex on their birth certificate was passed in conjunction with the transgender Anti-Discrimination Act of 1996 which made it 'unlawful for a person to discriminate against another person on transgender grounds'.¹⁹ In certain contexts this Act differentiates between individuals who are pre-operative or non-operative and those who are legally recognised as post-operative. In the provision of goods and services, for example, legally recognised post-operative male-to-female transgenders may not be denied entry to women only spaces, such as gyms, whereas pre-operative and non-operative transgendered individuals may be actively barred from entry.

The differential and uneven extension of citizenship rights to transsexuals is illustrated by contradictions in the use of the South Wales change of sex legislation within and between New South Wales and other Australian states and the federal government. The Births, Deaths and Marriages register is embedded in multiple and overlapping networks of power - most obviously, forms of local and national legislative

¹⁹ www.austlii.edu.au

power and administrative regulatory power, but also powerful cultural narratives of sexual difference. Moria Gatens argues that the imaginary body embedded in state policies and practices, such as those associated with the Births Deaths, and Marriages register, is not neutral. Instead it reflects and reproduces binary notions of sexual difference. The following section explores how the body politic is represented through dualistic understandings of sexual difference that are embedded in political languages and the administrative apparatus of the state.

Reflections: sex, gender and the body politic

Biological sex is an historically and culturally specific artifact which is commonly understood as a private 'essence' that transcends history and culture. Since biological sex is commonly understood as prior to history, how it is regulated through forms of legislative and juridical power tends to be accepted uncritically or taken for granted (Evans, 1993: 12). For the great majority of people biological sex is an imposed, ascribed status. The importance of this ascribed status to the state's administrative apparatus is indicated by the exacting regulations that permit people to change their biological sex. The surgical criteria, within the New South Wales legislation that enables post-operative transsexuals to alter the sex designation on their birth certificate, retains the sexed identities of men and women as mutually exclusive categories. This interplay between the New South Wales legislation and dialectically opposed sexed bodies maintains the integrity of the particular discursive formation, or the imagery and knowledge, associated with the body politic. The legislation is an example of the way that the subject of political theory cannot be neutral because it is always and already a sexed subject. In this view particular public narratives – ways of thinking about sex and gender that are embedded in state policies and practices – are activated in and through the Births, Deaths and Marriages register. These public narratives about sex and gender constitute and reflect pre-existing interests. This requires a study of the social production and reproduction of sexed identities through the use of political languages.

In New South Wales the legislation enabling recognised transgender people to alter the sex on the birth certificate was passed in conjunction with the transgender Anti-Discrimination Act of 1996 which made it 'unlawful for a person to discriminate

against another person on transgender grounds'.²⁰ During the course of my field research I interviewed one person who had been very strategic in using the New South Wales Anti-discrimination legislation. In the following narrative Sophie talks about how the legal protection offered by the legislation enabled her to change her gender identity at work. Prior to the legislation Sophie had been living as a woman outside of work. She came to work dressed in her female civilian clothes and changed into the compulsory male officer's uniform required at her place of work:

Sophie: I have only come out at work or changed over at work late last year, came back from holidays late October, it was only late October early November really when I went back to work as female. I told them before that, I said before I took the holidays last October that when I come back I come back as Jane [Doe].

SP: How did they react to that?

Sophie: At first a bit hostile, but that was at the time just after the new laws came in so they couldn't do much. I think if the laws hadn't come in I wouldn't have a job. I don't think I would be working there now if the laws hadn't come in. That is why I really left it to come out till after the law. At least that way we have some sort of protection, I think it is more in theory than in practice. I think if you tried to put it into practice you would have a hell of a job proving it and getting it through the courts... The law didn't get changed to the degree that we had hoped, but it did get changed. It meant that you can't just change your birth certificate to a female you have to have that endorsement on it. It was probably a compromise.

Sophie, MTF, 1997

The Anti-discrimination legislation came into effect on October, 1, 1996. The bill amended the Anti-discrimination Act of 1977 to provide separate grounds for prosecution against any person (or institution) that discriminates against an individual on the basis of their 'gender orientation'. The bill also introduced legislation to provide for the legal recognition of post-operative transsexuals (*Polare*, 1996: 6).²¹ Sophie took her holidays in late October, early November 1996. During her holiday break Sophie changed all her personal papers and was fitted at work for the compulsory female officer's uniform. After her holidays Sophie returned to work as a woman. Sophie is quite certain that if the legislation had not been passed then she would have lost her job as her female identity would not have been accepted at work. Sophie also recognises

²⁰ www.austlii.edu.au

²¹ 'The NSW Transgender Bill 1996' in *Polare*, edition 13 pages 6-7.

the legislation is not inclusive of all transgendered people because compromises had to be made in order to get the legislation through parliament.

One reading of the New South Wales anti-discrimination legislation is that the statutory reform provisions within the Act ensure equal treatment before the law for transgendered people. The legislation, for example, enables transsexuals to be recognised before the law as victims of sexual assault. In other areas, however, the New South Wales law and public policy relating to transgender people continues to reinforce 'heteronormativity' (Sullivan, 2000: 156). Altering the sex designation on the birth certificate does not confer equal citizenship to transgendered people in all cases. This may be seen, for example, in the specific exemptions to the Act in the areas of marriage and superannuation. The surgical requirements contained within the Act reinforce gendered, (hetero)sexual norms and family arrangements. In these examples transsexuals have been effectively marked out as 'different' members of the citizenship community.

State solutions to the different bodies and identities of transgendered people embody the contractions between the idealised heterosexual male body of political theory and the diverse bodies of actual people. Moria Gatens (1996) argues that traditional philosophical accounts of what it means to be human are governed by understandings of what it means to be male. Within these accounts women are constructed as that which is 'not man'. Feminists have documented the ways in which these male accounts of the human subject have adversely affected understandings about women and femininity (Gatens, 1996: viii). Following on from Michelle LeDoeuff's work (cited in Gatens 1996: ix) it is the interplay between dialectically opposed sexed bodies that maintains the particular discursive formation, or the imagery and knowledge, associated with the body politic.

For Gatens the sex/gender distinction encourages a neutralisation of sexual difference and sexual politics. Transgender bodies and identities may be incorporated into the body politic as long as their differences are removed surgically. In this example, it is the physical body of the transgender person, and not the social categories by which they are identified, that is called into question. According to Gatens, feminist theories of sexual equality, like the New South Wales legislation, base their proof of gender as a social category in the flawed work of Robert Stoller, who argued that biological sex augments but does 'not determine the appropriate gender identity for

that sex... a person's gender identity is primarily a result of postnatal psychological influences' (Gatens, 1996: 6). As such transsexualism and transvestism are entirely social.

Gatens argues that gender theory contains an unreasoned argument that both the mind and body are neutral, passive blank slates on which are inscribed various 'social lessons'. The body is understood as a passive mediator of these inscriptions. Gender theory results in a simplistic solution to oppression, one that involves legislative sanctions against discrimination and affirmative action programmes for re-education and change. Gatens argues that:

...a programme of re-education which involves the unlearning of patriarchy's arbitrary and oppressive codes and a relearning of politically correct and equitable traits, which will, in turn, lead to the whole person: the androgyn (Gatens, 1996: 4).

Moria Gatens is critical of solutions to oppression that involve either legislative sanctions against discrimination and/or affirmative action programmes for re-education and change. She argues that legislative strategies and affirmative action programmes do not challenge the non-neutrality of the imaginary body that forms the basis for state policies. Instead, Gatens equates the programme of re-education with one of de-gendering (through the removal of difference). This is because the project of equality implicitly rests on the flawed assumption of a neutral body politic. It does not challenge the way in which the neutral body on which state policies are based is in fact a male body. Gatens says that women's bodies are always problematic whenever they differ from the body politic - the same could be said for transgender bodies. For Gatens the sex/gender distinction uncritically/untenably deploys a mind/body distinction which results in an either/or argument. Either the human subject is entirely determined by biology or determined by social/environmental factors. This posits a naïve causal relationship between body and mind. A neutral passive mind implies a behavioural stimulus-response model of the acquisition of gender. Instead she argues that the human subject is actively produced. The notion of a passive neutral body is equally problematic, Gatens states:

Concerning the neutrality of the body, let me be explicit, there is no neutral body, there are at least two kinds of bodies: the male body and the female body (Gatens, 1996: 8).

As long as feminists continue to base feminist theories about embodiment, subjectivity, politics or ethics on understandings of woman as other to man, then they fall into the trap of oppositional thinking. The subject is always a sexed subject and therefore it cannot be neutral. The Births, Deaths and Marriages Register attempts to ensure consistency in the recording of sexed identities. These records are based on the construction of male and female as mutually exclusive categories. Transgendered people who want to change their birth certificate are subject to complex rules that attempt to maintain the either/or status of the register. The personal histories of transgender people, combined with variations in 'change of sex' policies and practices within and between Australian states, disrupts these attempts to create consistency within the register. Post-operative transsexuals, who have changed their birth certificate to reflect their chosen gender, are able to claim an historical identity in one sex and a current identity in another – in this sense they are both/and. As a result, they may have a multiplicity of identities within a single data base. Transgender bodies and identities trouble the body politic precisely because they are both/and. State solutions to these anomalous bodies embody the contradictions between the idealized heterosexual male body of political theory and the diverse bodies of actual people. The New South Wales legislation requires transsexuals to undergo forms of surgery that induce reproductive non-functioning before their gender identity is able to be officially recorded by state authorities. This requirement may be likened to a form of biological 'de-gendering' or 'de-sexing' whereby transsexual differences from the binary gender categories that underpin the body politic are surgically removed. Within the legislation transgender people are identified with the body in so far as the body is understood as the site for these inscriptions.

Feminists have argued that women's bodies have historically been constructed as incomplete, and that this incompleteness has been incorporated into state legislation and the law (Gatens, 1996: 26). Assuming that normative associations between anatomy and sexed identities are unproblematic, the legislation that allows post-operative transsexuals to change sex on their birth certificate constructs the female genitals of male-to-female transsexuals as anatomically correct, and therefore complete, and the female genitals of female-to-male transsexuals as anatomically incorrect and therefore incomplete. By taking into account anatomical sex of the female-to-male transsexual at birth the legislation is consistent with feminist arguments that state regulations implicitly construct women as incomplete beings. In this case, however, it is also the male identities of male-to-female transsexuals (or the male body

of the female-to-male transsexual) that is singled out as different within the legislation because it is constructed as incomplete.

Gatens contends that the object of study should not be the physical or anatomical, neutral or dead body or socialisation theory, but the lived body, the situated body. She argues that to understand sex and gender (biology and the personal significance of that body) then one needs an analysis of the socially constructed imaginary body. Gatens defines the imaginary (body) as 'those images, symbols, metaphors and representations which help construct various forms of subjectivity' (Gatens, 1996: viii). While I agree with Gatens that the imaginary body of ethics and politics is a male body, I also think that this body is what Weber would term an 'ideal type'. It is not only women's bodies that problematise the body politic it is any body, male or female that does not mirror it. Not to acknowledge this is to oversimplify arguments that men are privileged relative to women in relation to the imaginary body politic. The body politic is not neutral; it is always sexed. The indeterminate bodies of inter-sexed people graphically illustrate this point, as in Australia hermaphrodites are currently unable to legally marry a person of either sex (Dunderdale, 1992: 24).²² Saffron, an intersexed person interviewed for this research project, is in the ironic position of being excluded from the body politic precisely because her sex is both/and or neutral:

Transgender people are in some cases non-citizens. I remember thinking one day after a difficult debate (in which the issue of marriage was raised as a barrier to the proposed law changes which would allow some transgendered people to change the sex on their birth certificate) I'm a non-citizen so to speak. You can get a whole lot of other documents, your driver's license things like that, in your gendered name, but it falls short of some basic human rights. It says it all, marriage is a privilege, not a right. Certainly everyone has the right to bear children or to have children, whether or not you can is a different story, whether it is physical or social (infertility) but that right should be there, and the right to marry should be there for everybody. It is denied to a whole section of people, it is denied to transgendered people, it is denied to gay or lesbian people...But it is also about custody, access to kids, wills and probate and a whole of lot of things like that, that civil authorities don't seem to want to address (for gay, lesbian and transgendered people).

(Saffron, 1997)

Saffron's marginal status as neither quite biologically male or female, combined with her interest in civil liberties, means that she has an acute sense of the way in which she

²² The uncertain status of people who are born intersexed in Australia has existed since 1979 when a Family Court judge held that the marriage of C and D was void because 'a hermaphrodite was in law neither male or female' (*In the Marriage of C and D* (1979) 35 FLC 340 cited in Dunderdale, 1992: 24).

is 'othered' by the imaginary neutral citizen who forms the basis for social policy. The surgical criteria within the New South Wales legislation that enables post-operative transsexuals to alter the sex designation on their birth certificate retains the sexed identities of men and women as mutually exclusive categories. This interplay between the New South Wales legislation and dialectically opposed sexed bodies continues to privilege heterosexuality and its relationship to marriage, pro-creation and family. Despite the existence of these more liberal regulations that allow changes to the sex designation on the birth certificate in New South Wales, biological sex remains relatively closed and self-perpetuating - open only at the margins.

Registering identities, regulating bodies

Drawing on Gatens' analysis of the body politic, an argument has been made for the way transgender bodies problematise the body politic and dualistic understandings of sexual difference. In New South Wales state legislation allows post-operative male-to-female transsexuals born in New South Wales to change their sex on their birth certificate. Female-to-male transsexuals have to have had a hysterectomy in order to qualify under the same legislation. For male-to-female transsexuals the construction of female genitals, which induces reproductive non-functioning qualifies them as female. For female-to-male transsexuals reproductive non-functioning in the form of a hysterectomy qualifies them as male. One reading of this legislation is that both surgery and reproductive non-functioning are important to the way that the state regulates transgender bodies. The state legislation that allows post-operative transsexuals to change their birth certificate leaves the transsexual with no right to bodily integrity. Of course particular transgendered people can and do, refuse to have surgery but these bodies are not legally recognised in New South Wales.

The Births, Deaths and Marriages register acts as a bridging device linking individual bodies and the state. The operation of the register is set by state policies which determine the conditions under which births are recorded and their details altered. The legislation governing change of biological sex on the Births, Deaths and Marriages register is an attempt to re-impose either/or sex/gender categories on transgendered bodies and identities that are both/and. The legislation responds to the desire for formal state recognition of their gender identity by some transgendered people, it does not however, disrupt the existing body politic. Transgendered individuals who want to change their birth certificate are subject to complex rules that

attempt to maintain their either/or status on the register. The corporeal diversity and personal histories of transgendered people, combined with variations in 'change of sex' policies and practices within and between Australian states, complicates the body politic and disrupts these attempts to create consistency within the register. While the reforms impose dualistic categories and new ways of regulating bodies, they also construct contradictions and anomalies by excluding some bodies and including others. These inclusions and exclusions reflect the diversity of the transgender community. The next chapter explores some of these connections and differences within the Sydney-based transgender community.

Inventing (Comm)unity

Space, place and collective identities

“Community is an abstract concept tied here in Sydney to geography”.
Wendy (MTF, 1996)

This chapter explores local debates surrounding identity politics within a particular transgender community. It incorporates methodological concerns by reflecting on the process of doing research in a particular locale. Anderson’s (1991) concept of imagined communities is used to put forward an argument about the centrality of time and place for sociological research and analysis. However, I also problematise ideas about communities and common territory by looking at the way identities are constructed in relation to broader social configurations that are not tied to place.

Tensions surrounding the politicisation of identities within the inner city Sydney transgender community point to the way social bonds, tacit understandings and political mechanisms operating within communities are open, contested and contradictory. At the same time communities are ‘imagined’ through spatial symbols, public narratives, collective social rituals and shared times and experiences. This chapter analyses how communities are actively constructed and how the groups established through these actions are simultaneously problematised and deconstructed through relational identities that operate at different local and national scales. This diversity poses particular challenges for researching ‘imagined communities’ particularly when the information provided by informants problematises the social groups with which they identify.

Crucial to the way in which I negotiate these challenges is my discussion of the construction of relational identities in a particular set of physical spaces in Sydney in 1996/97. This requires attention to how I conceptualise and use space and place in this chapter and in the thesis more generally. Space is relational in the sense that it is constituted by and constitutive of social processes (Massey, 1992: 80-81; Fincher and Panelli, 2001: 130). Space is also geographical (McDowell, 1996: 32),

political (Massey, 1992: 66) physical (Wendell, 1992: 69; Chouinard and Grant, 1996: 176), embodied (Grosz, 1994: 79-80) and social (Plummer, 1995). The social dynamics of space include its gendered (Massey, 1994: 2; Namaste, 1996a: 225) and sexualised dimensions (McDowell, 1995; Myslik, 1996; Valentine, 1996; Duncan, 1996; Namaste, 1996a; Brickell, 2000). The embodied dimensions of space also refer to the social space immediately around the body. The size and form of this surrounding space varies according to the situation and the ethnicity, sex and culture of the individual (Grosz, 1994: 79-80). Geographic space refers to how the spatial is mapped in relation to bounded places from home to national territories. (McDowell, 1996: 32). Geographic space, as cultural object, includes symbolic and material interconnections between economic and political power relations that are simultaneously local and global (McDowell, 1996: 39). The political dimensions of space are indicated by geographic terms such as 'margin' and 'centre' that are used in academic analyses that explore the politics of location (Massey, 1994: 66).

Place is another significant element in my construction through fieldwork of transgendered community practices. The geographic boundaries of spaces and places are easier to define than the boundaries of communities, which may transcend space and place. Place, however, tends to be viewed as more bounded or localised than space (Massey, 1994: 5). Place of birth and place of residence, for example, refer to specific locales that are fixed in space and time (past and present respectively). The meanings associated with these examples of place are not given but are instead constructed in relation to broader social configurations that transcend place such as nation, sex, gender and family (Massey, 1994: 5; Jacobs and Fincher, 1998: 21). Places are open to the presence of social relations crafted at different spatial scales. As a result, the meanings associated with place are never fixed but are instead open, porous and contested (Massey, 1994; McDowell, 1996). Identities are shaped through individual relationships with places (Jacobs and Fincher, 1998: 20).

There are different possibilities for, and limitations on, claiming transgendered identities in different urban locales. These possibilities vary over time and between and within cities. Transgendered individuals have particular experiences and interests in common but they also have interests that cut across differences in social gender, sexuality, surgical status and place of birth and/or residence. Transgendered identity is not homogeneous (see Figure 1) but is multiple and contradictory - fragmented by the existence of different relational spaces that are both literal and figurative or symbolic.

Identities constructed at different spatial scales flow through place (Jacobs and Fincher, 1998: 21) In Chapter Eight, for example, I explored the relationship between the local and national context in the construction of gendered citizenship identities in New South Wales. In this case, localised gender identities, differentiated by place of birth, are constructed through non-local state and federal legislation that specifies how the sex designation on the Births, Deaths and Marriages register is to be regulated and administered in different state and national settings. These regulatory mechanisms have an impact on identities presented in international contexts as individuals move across national boundaries using passports that are simultaneously local, national and global. State recognition of certain transgender identities by the New South Wales government is co-extensive with the production of difference through formally articulated and administered exclusions. In this chapter I argue that place-based identities are tied to the micro-politics of sexed bodies constructed within broader patterns of inclusion and exclusion and executed in particular times and spaces (Jacobs and Fincher, 1998: 21-22).

Time is another crucial factor in my analysis of transgendered community practices in different localised settings. Time is chronological, cyclical or seasonal and embedded in the collective times of individuals and communities. In Chapter Six I argued that individual agency is embedded in multiple and inter-related dimensions of time. Social agency is both individually and collectively produced and embedded in shared understandings about social life. Identities are not only individual - for example, professions or communities may have identities. However, it is important to note that both group and individual identities are collaboratively produced. That is, collective identities have individual 'faces' while individuals craft their identities in relation to larger identity categories such as nation, sex, class, gender, occupation etc. Communities are also embedded in multiple and overlapping dimensions of time. Benedict Anderson (1983, 1991) argues that group continuity and shared social meanings are constructed through the interaction between the collective time(s) of the individual and the community. Narratives about experiences of community and articulations of collective identity can be expressed and understood only through the categories available in discourse and through the narratives about community that circulate in a particular locale. It is the interaction between individual stories, public narratives, local context and collective times and identities that is of interest in this chapter.

Locating communities in narratives and in time

Benedict Anderson (1983: 15) famously claimed that '[a]ll communities larger than primordial villages of face-to-face contact (and perhaps even these) are imagined. Communities are to be distinguished, not by their falsity/genuineness, but by the style in which they are imagined'. Imagined communities in Anderson's account are groups that are large enough for members to have a sense of connection with unknown others who share similar circumstances. Anderson (1983) explores how collectivities are imagined as homogenous entities in spite of internal differences. Nations are imagined political communities, for example, because the nation is conceived as a historical and horizontal linking of fraternity, power and time (Anderson, 1983: 15-16). Nationalism in this account has an immemorial past and limitless future that transforms contingency into meaning, uncertainty into continuity, chance into destiny (Anderson, 1983: 18-19).

Anderson suggests that a sense of common experience is crucial to the way that national communities are invented. Sameness is achieved through the construction of a standardised common language, its connection to a particular territorial state, and its use in education and in other administrative mechanisms (Hobsbawm, 1990: 59-62). Private property, the media and markets also facilitate national cohesion because they operate as unified fields of exchange and communication. Drawing on Anderson, Craig Calhoun (1997: 4-5) identifies the following characteristics as typically present in the rhetorics of imagined national communities. Nations are constructed as bounded territories, indivisible and sovereign. They have political legitimacy, temporal depth, a sense of membership through common descent and a historical connection to a particular territory. National communities are imagined through a sense of shared culture and popular participation in collective affairs. Internal differences, however, make nations ongoing projects (Anderson, 1983: 105) constituted by and through claims that are made about themselves and their distinctiveness. People recognise one another as members of a collective or community, and therefore, recognise others as non-members or strangers (Hobsbawm, 1990: 46).

Anderson (1983; 1991: 11-12) suggests that community, like nationalism, is the process of constructing continuity and meaning out of shared values, chance and contingency. According to Anderson, communities are constructed through imagined connections between written symbols, shared times and collective social rituals. In Chapter Eight, I argued that registers are embedded in multiple and

overlapping dimensions of time. This chapter also incorporates several ways of understanding and using time. Time, symbolised in mundane artifacts such as the clock and calendar, is chronological, progressive or linear. Time, however, is also part of the daily lives of individuals and communities (Massey, 1992: 68). The calendar is important to the construction of collective times and identities. It records in advance the significant annual events in which a community participates (Bourdieu, 1977: 97-98). In Sydney the Diva Awards in August, the Sleaze Ball in October and the Mardi Gras Parade in late February are examples of shared social rituals embedded in the collective time(s) of the gay and lesbian community. Publicity for the 1997 Sydney Gay and Lesbian Mardi Gras, for example, described it as the 'biggest event on the global gay and lesbian social calendar'.¹ The local Sydney Mardi Gras is marketed as both a national and an international event. Local queer events, and the identities that they represent, are not limited to local places but are instead constituted through national and international processes (Plummer, 1995: 149). This process whereby the local is extrapolated to the global is also illustrated in the following political messages of support for the 1997 Mardi Gras. In these messages the Sydney Mardi Gras is represented as a celebration of local and national community, and as an important part of Australia's national and international image:

Mardi Gras is a truly international festival, highlighting the great diversity and talent of the Sydney lesbian and gay community. The 1997 Sydney Gay and Lesbian Mardi Gras will be an opportunity for all Australians to show the world that we celebrate our cultural diversity – regardless of our individual beliefs and orientations – Kim Beazley, Leader of the Federal Opposition²

Mardi Gras provides an important international demonstration of Sydney's tolerance, creativity and sense of community... Frank Sartor, Lord Mayor of Sydney³

It (Mardi Gras) makes an important contribution to the cultural diversity and the economy of the city and the nation – Hon Sir William Dean, Governor General of the Commonwealth of Australia⁴

The Mardi Gras is one of Australia's key parades, and a major national, and international tourist attraction... Dr Michael Wooldridge, Minister for Health and Family Services (Federal Parliament)⁵

¹ 1997 Sydney Gay & Lesbian Mardi Gras Guide p.94

² 1997 Sydney Gay & Lesbian Mardi Gras Guide p.7

³ 1997 Sydney Gay & Lesbian Mardi Gras Guide p.7

⁴ 1997 Sydney Gay & Lesbian Mardi Gras Guide p.9

⁵ 1997 Sydney Gay & Lesbian Mardi Gras Guide p.9

In these messages of support the authors are identified through their location in different local (Mayor of Sydney, State Parliament) and national (Federal Opposition, Governor General) settings. In other words, the meanings associated with this place and event operate at both local and national levels. At the same time identities, constructed through these messages of support associated with career, occupation and/or political status flow through the Mardi Gras event and its spatial location.

The different dimensions of collective and chronological time outlined above may be identified in Benedict Anderson's (1983, 1991) arguments about the way in which communities are imagined. He suggests that two forms of writing are important to the construction of an imagined community: the novel and the newspaper (Anderson, 1991: 25). Newspapers link community and time meaningfully together. The solitary act of reading the newspaper connects the individual to an imagined community of anonymous others who participate in the same activity. (Anderson, 1991: 33). The first form of imagined linkage between the individual and the community is time. 'The date at the top of the newspaper, the single most important emblem on it, provides the central connection – the steady onward clocking of homogeneous time' (Anderson, 1991: 33). The second form of imagined linkage is the relationship between the newspaper and the market. The simultaneous consumption of the newspaper on a particular day connects the individual to an imagined community of anonymous others who read the newspaper at the same time. (Anderson, 1991: 35). The newspaper provides a sense of collective time - in the sense of chronological time and the collective time(s) of the individual and community.

Transgender autobiographies, the queer press and the magazine *Polare* published through the Gender Centre⁶ are forms of writing that are important to the way transgender identities and communities are imagined. Transgender autobiographies make private stories about changing gender accessible in public contexts. These stories are often scanned by 'secretive' or pre-operative transsexuals for information about how to relate to the medical profession and for ideas about how to pass in your chosen gender. *Polare*, 'a magazine for people with gender issues'⁷, is

⁶ The Gender Centre is a resource centre for people who transgress binary gender categories such as transsexuals, transgenders and transvestites. The centre is funded by the New South Wales government, it operates much like a community house, but also provides gender out-reach services, residential drug and alcohol services, information and other counselling and referral services. Prison visits and policy advice are also provided through the centre.

⁷ 'Polare a bi-monthly magazine for people with gender issues' is a slogan that is printed either on the cover (edition, 15, 1996 for example) or the contents page (edition, 34, 2000 for example) of the magazine. This term is not uncontroversial. In a letter to the editor titled 'Whose gender issues?'

published bi-monthly. The magazine contains health and legal advice, political commentary relevant to people with 'gender issues', safe sex information, a letters to the editor column, personal stories, international transgender news, a local, national and international directory, a community advertising page and a social scene section. Reviews of books and explications of academic theories relevant to gender and sexual minorities are also regular features.

'Print-capitalism'⁸ (Anderson, 1983: 40) and film are two of the ways that the Sydney queer community represents itself to itself and to the outside world. The Sydney queer community is large enough to support two weekly 'tabloid style' newspapers – 'Capital Q' (*Q*) and the 'Sydney Star Observer' (*SSO*). The queer newspapers are prime movers in setting the agenda (Long, 1958: 260) for what gets debated and discussed within the community. These newspapers are important to the sense of queer community within Sydney in two ways. First, they contribute to debates within the queer community via editorials and the letters to the editor column. They report events that would not normally be considered 'newsworthy' by the mainstream dailies and they contain reviews of queer film and theatre. Second, these reports are written from the point of view of, and in the style of language and humour used within the queer community. The editorial copy and the majority of the advertisements in the papers are specifically targeted to an imagined queer readership. The Newtown Gym Advertisement (see Figure 2) 'FAGS DYKES STRAIGHTS TRANNIES And that's just the staff... Every Body Feels at Home at NEWTOWN GYM',⁹ for example, uses humour to communicate the diversity of its staff and therefore by implication the membership characteristics of the gym.

Sydney is an iconographic queer space. It claims to be the second largest queer city in the world – second only to San Francisco. The Sydney Gay and Lesbian Mardi Gras Festival Souvenir Guide (1997: 1) boasts that 'the world looks to Sydney and Mardi Gras for inspiration in Gay and Lesbian issues'. Corporate advertising also acknowledges Sydney's emerging queer communities. An example of this is the Optus Vision Movie Network 'More Drama Queens' advertising postcard (see Figure 3) that I collected from a café in Newtown in the Summer of 96/97. The inscription on the reverse of the postcard reads campily...

Norrie May Welby (*Q*, issue 202, 16/08/96) refers to the description of 'anyone who transcends standard gender roles' as 'people with gender issues' as 'patronising'.

⁸ 'Print capitalism' refers to the means whereby printed material is produced, distributed and sold – and the industries that support this process such as computer manufacturers, printing press manufacturers and the pulp and paper industry (see Anderson 1983: 38-40).

⁹ *Q*, 9 August, 1996, issue 201

Hi sweetie, I'm busy watching all the fabulous drama queens on the Movie Network. So I haven't been out in ages! Darling, you must come over and watch them with me. Love and kisses...

Corporate sponsors of the 1997 Gay and Lesbian Mardi Gras whose advertisements played to either the parade or the queer community included: The Rocks ('Eat Drink and BE Mary', see Figure 4) Qantas ('Proud to be part of the parade'), Hahn Ice Beer ('Enjoy a Hahn Ice during the 1997 Sydney Gay and Lesbian Mardi Gras Festival') and Telstra ('We like coming to the Party... Because at Telstra, we're not just here to have a good time, we're here all the time', see Figure 5). Following a series of similar television advertisements the lens of the 'Smirnoff' vodka bottle turns a weight machine into an instrument of bondage. Other sponsors whose advertising also incorporated queer themes included Holeproof ('Underdaks. You'll want to get caught with your pants down', see Figure 6) and Absolut Vodka ('Absolut Party'. Featuring a bottle wearing a feather boa).¹⁰ Clever marketing acknowledges the power of the 'pink dollar'¹¹ as interstate and international visitors descend on Sydney in late February. This marketing, and the hype surrounding the Mardi Gras festival and other significant events on the gay and lesbian social calendar, provides a sense of collective identity and imagined community – even if these advertisements are likely to be seen only in queer spaces such as bookshops, gyms and gay bars, clubs and cafes.

Special events, such as the Mardi Gras Parade, celebrate diversity by challenging the invisibility of gendered and sexual minorities in public spaces (Brickell, 2000: 168). They are, however, a double-edged sword. The lesbian and gay pride parades may be viewed as a way of celebrating difference and affirming minority identities, but they are also the way that the queer community presents itself to middle Australia as exotic other. The Sydney Mardi Gras is an institutionalised event that produces its own ubiquitous homogeneous (queer) identity. The unity of the Mardi Gras identity conceals often-bitter divisions within and between the different gay, lesbian and transgender communities. Such divisions are rarely articulated or acknowledged outside of the minority communities in which they are embedded. It is these connections and differences across communities, and the way that groups

¹⁰ All examples taken from the 1997 Sydney Gay and Lesbian Mardi Gras Souvenir Guide.

¹¹ The 'pink economy' refers to the role of the market in the construction of queer subjectivities/spaces through linking consumption to (homo)sexuality. The 'pink dollar/pound' refers to queer economic power and to the assumption that gay men are affluent consumers – 'gay' in this context equals gay white men with large discretionary incomes (Binnie, 1995: 182-187). Notable centres of queer consumerism include Amsterdam, London, San Francisco and Sydney (Knopp, 1995: 158).

are defined in relation to dualistic understandings of difference, and/or through comparison to other places, that is missing from Anderson's (1983, 1991) account of the way in which communities are 'imagined'.

The politics of 'here' and 'there'

The transgender community is not homogeneous. Divisions within Sydney transgender community are broadly geographical, political and anatomical. People are also separated along ethnic and class lines (Perkins, et.al., 1994: 25-27) and in relation to social gender and combinations between social gender and sexuality.¹² Harrison White (1992: 313) argues that identity categories, such as social gender, and biological sex, are not internally coherent because human actions and selves cut across these realms. The heterogeneity of the Sydney transgender community is explored in the following sections of this chapter.

While there are geographic differences within the Sydney community between the inner city and the suburbs and differences within the inner city between Darlinghurst and Newtown. There are also differences between Sydney and other urban centres. Few people to whom I spoke during the course of my research had experienced living in, or visiting, different parts of Australia. However, one person who had moved from Perth to Sydney commented on the differences that she noted between the two places:

The difference between Perth and Sydney, what I find is quite different, Perth does not really have a transgender community as such, Perth does not have that much of (transgender) community other than the gay and lesbian community over in Perth. The gay and lesbian community is not all that popular over there or widespread. But it is funny how things work out, I find living in a lot of places you have little groups of friendships and family groups there that link up, especially in Perth. And what I found in Sydney is dramatically different in that all of sudden whereas OK I was a transsexual woman in Perth or someone making a gender transition, I was a tranny in Sydney. While the word tranny was used back in Perth, it was not used in the manner of a slogan if you know what I mean. Personally, I don't like the term it is misspelt over here with only one n... But it is so politicised over here now it wasn't over in Perth, despite the fact that I was at one point a spokesperson and then the co-ordinator of the local lobby group in Perth, nonetheless you didn't have a close knit community as such you had people who knew people and they then spoke to those people but not overall. There was no overall group identification.

Elaine, (1996)

¹² See Chapter Three in relation to this – including footnote number 11. Some of these issues are also raised in the interview material that has been included in the latter half of this chapter.

Elaine's comments illustrate the way in which places help to shape individual identities (Jacobs and Fincher, 1998: 20). In Perth Elaine identified herself, and was identified by others, as a 'transsexual woman'. In Sydney she is identified by others as a 'trany' but does not claim this label for herself. In Perth 'trany' does not exist as an identity category, nor is it used as a political 'slogan'. In Sydney 'trany' is the means by which people who transgress gender boundaries claim 'group identification' and/or membership of a politically active community.

Elaine's experience of difference in claims to identity and community between Perth and Sydney in 1996/97 is consistent with academic ideas about the way in which the meanings associated with place *and* the construction of local queer identities are constituted in relation to non-local processes (Massey, 1994: 5; Jacobs and Fincher, 1998: 21). Place introduces heterogeneity and difference into the category of 'transsexual woman' - a category that Elaine indicates she had previously experienced as a more-or-less homogeneous entity. In this narrative contests over identity are articulated through the spatial relations of places. Doreen Massey (1994: 5) argues that the 'meanings associated with place are always articulated in relation to some oppositional relation or some other place that transcends the place in question'. As a result the meaning of place is always open and porous. Elaine's observations illustrate the way narrative identities have different interpretations whereby particular meanings, and struggles over identity, become salient in different relational settings.

Drawing on Massey (1994), Jacobs and Fincher (1998: 21) argue that 'places are open to the presence of social relations crafted at all spatial scales'.¹³ The politics of scale also frame Elaine's narrative. Elaine is able to identify differences in the way transsexual identities are constructed in Perth and Sydney. In the larger Sydney community the possibility of transgender as a distinct category is heightened. In this place transgendered people are able to develop their own networks and services. In a smaller community such as Perth, political activism is much more dependent upon co-operation with other groups. In this narrative complex configurations of identity are tied to particular places and reflect the size of the

¹³ Identities are constituted through multiple and interpenetrating axes of difference such as gender, class, ethnicity, sexuality. Space is also one of these axes of difference. In analyses of spatially located differences emphasis is placed on the intersection of differently scaled local, national and global processes on the construction of identity. In other words, local identities are constituted in relation to non-local processes (Jacobs and Fincher, 1998: 21). Hence, 'spatial scales' refers to the way that space contributes to the construction of identities; this analysis also recognises that contests over

space. In Sydney transgender people attempt to assert their differences from the queer community. In Perth such differences are minimised in the interests of solidarity and co-operation. Political differences associated with scale are also present in Wendy's comparison between Sydney and the United States in Chapter Two. In that chapter Wendy suggests that it is possible to accommodate diversity without division within the transgender community in the United States because of the size of those communities compared to Sydney. In Elaine's narrative the larger numbers of people who identify as transsexual or transgendered in Sydney enables them to develop services and networks independently of the gay and lesbian community. In North America the larger size of the transgender population compared to Sydney enables different interest groups within the transgender community to develop.

Sydney is claimed to be the transgender capital of Australia (Perkins et.al., 1994: 11). Perkins, Griffin and Jakobsen (1994: 11) suggest that transgender people tend to gravitate to large urban centres for the following reasons:

(i) the relatively low number of transgenders (elsewhere), (ii) their historical investment in anonymity, (iii) the possibility of finding work in the sex and entertainment industries..., (iv) the greater degree of acceptance (or possibly nonchalance) amongst inner-city folk, (v) and the variety of services available to inner-city residents (e.g. choices in medical service providers, beauticians, clothing suppliers etc.)...(Perkins, et.al., 1994: 11)

Most of the transgender population in Sydney is concentrated in the inner city suburbs (Perkins et.al., 1994: 11). Sydney tends to be the destination of choice in a 'transgender diaspora' - men and women who gravitate to large urban centres because they are unable or unwilling to live in their chosen gender in the place where they grew up. One consequence of this is that Sydney's transgender population includes a high proportion of migrants, including 'Maoris, [sic] Islanders and Asians' (Perkins et.al., 1994: 11).

Ki Namaste (1996a) identifies transgendered public space with urban areas known for their transsexuals and transvestites. S/he suggests that '[t]hough gay male public space is defined through the presence of gay businesses and bars, transgender public space reflects the areas of the city frequented by transgendered sex workers' (Namaste, 1996a: 231). This is not entirely the case in Sydney. Sydney

identity occur in and through the spatial relations of places (Jacobs and Fincher, 1998: 21). Space is therefore political.

has designated areas where street prostitution is 'legal' (read 'tolerated').¹⁴ As a result transgendered sex workers tend to live close to Sydney's notorious red light district Kings Cross and to tout for business on Williams Street in the Cross (Perkins, et.al.:1994; Lazarus, 1994: 102). Bars and cafés frequented by openly transgendered people tend to be in the inner city suburbs of Darlinghurst and Newtown. In the summer of 1996/97 transgender-friendly spaces in inner city Sydney included: King Street in Newtown, 'the bookshop' with stores in Oxford Street, Darlinghurst and in King Street, the trendy Fish Shop coffee house on King Street, the Newtown Gym, the 'Taxi Club' night-club in Darlinghurst (see Figure 7), Drag Bag in Darlinghurst, the Trany Pride Centre in Surry Hills, the Newtown and Imperial Hotels and the Gender Centre in Petersham. In 1996/97 drag acts were performed at the Albury Hotel, DMC, the Midnight Shift and The Imperial Hotel. These places are scattered over a wide geographic area within the inner city of Sydney; none of these sites for transgendered community activity, leisure and performance is located in Kings Cross, which is the locale of transgendered sex workers.

If Sydney is an iconic queer city, then, within that city Darlinghurst and Newtown are iconic queer spaces. The road trip in the Australian film 'The Adventures of Priscilla Queen of the Desert' (Elliott, 1994) begins in Newtown, Sydney. The bus leaves from the Imperial Hotel¹⁵ located in Eskineville Road, which runs off King Street - the main commercial street in Newtown. It is significant that Priscilla's Sydney-based location is Newtown and not Darlinghurst/Oxford Street - the more high profile queer commercial area of Sydney (and the location for the annual Mardi Gras Parade). This spatial positioning recognises that Newtown, and not Darlinghurst, is the preferred urban (social) space for many of Sydney's inner city transys. The film 'Priscilla' enhanced Newtown's reputation as an iconic space within Sydney. In the film 'Newtown' is both a local and an international space. Local knowledges, however, are coded within the film in ways that have different meanings for local audiences. Newtown in particular is a diverse place that makes it a safe space for transgender people. This is illustrated in the following conversation with Elaine:

¹⁴ The New South Wales Prostitution Act of 1979 legalised street soliciting and sex work in a brothel or private flat (Jakobsen and Perkins, 1994: 54). In 1983 this act was amended to make it illegal to solicit in a public street near a dwelling, and near or in a school, church or hospital. The ambiguous meaning of the word 'near' in the amendment expanded the powers of the police by increasing the scope for selective enforcement of the law (Neave, 1994: 79-80).

¹⁵ In the 1997 Gay and Lesbian Mardi Gras Festival Souvenir Guide the Imperial Hotel also advertises itself as 'the home of Priscilla'.

An observation that I found interesting was when I went down to Newtown in Sydney - now that is a place that has got no majority in it! There is no one single group that is a majority in Newtown, and I've walked around Newtown and not worried about a single thing, because there are so many people who look so radically different down there that I was the most conservative person on the street.

Elaine, MTF, (1996)

Elaine comments on how the heterosexual domination of public space is disrupted by the diversity of the Newtown population. Furthermore, Elaine experiences Newtown as a place where it is possible to be openly transgendered because binary gender categories in this space are more open and fluid than is the case in her place of residence. Elaine's narrative is consistent with key arguments within feminist geography about the way in which space is normally constituted in gendered and sexualised terms (Duncan: 1996: 127).

Feminists have long recognised that space is used in gendered ways. In the mid-1980s Shelagh Cox and Bev James (1987: 1) wrote that '(w)e all inhabit two realms, the public and the private, and they shape our lives'. More recently Doreen Massey (1994: 6) has argued that '[c]onceptualisations of space are tied up with dualistic understandings of gender and the bundles of characteristics assigned to each'. Within these arguments the public sphere is masculine; it is associated with work, strength, rationality, the civic. The private sphere is feminine; it is associated with home, dependence, reproduction and emotion (Cox and James, 1987: 2-3; Peak, 1993: 416-417; Massey, 1994: 2, 9-11, 186, 1996).¹⁶ Space is gendered and many spaces, public and private, are male dominated (Brickell, 2000: 163; Myslik, 1996: 159). The hegemony of binary gender categories remains unproblematic. Ki Namaste (1996a: 226) for example argues that everyday locations assume the 'naturalness' of binary gender categories:

Gender outlaws pose a fundamental challenge to public space and how it is defined and secured through gender...

Binary gender categories mean that transgenders need to live as one or the other in order to avoid verbal and physical harassment. In transgender communities this is known as the need to pass (Namaste, 1996a: 226 and 228 respectively).

Norrie May Welby also comments that because sexuality is often invisible in ordinary public interaction gays and lesbians are discriminated against, not because they are queer, but because they breach binary gender categories:

¹⁶ See Sharp (1996:101-102) for an alternative understanding of the meanings associated with public and private spaces in Eastern European countries - whereby the private or domestic sphere represents transcendence or freedom from the state.

Gays and lesbians also breach the gender roles and get discriminated against for breaching fixed Western gender roles of behaviour. There we can find allies in feminists and any marginalised community... I also think homophobia is not so much fear of homosexuality as it actually is a fear of people breaching gender roles. And some of them (homosexuals) get called a 'poofter' in the street and they are walking down the street on their own, how can you tell who is a poofter? You have to be looking at someone else or holding someone's hand at least before someone can tell what sex you are attracted to or make any judgement about the sex you are attracted to. No the person is called a poofter because they are breaching gender roles, they are maybe walking with a bit of a swish or a limp wrist or a woman gets called a dyke because of her short hair and her clothes. It is because she is breaching the gender expectations we get called poofers or dykes.

Norrie May Welby, interview, 1997

Judith Butler (1990: 5) argues that binary gender categories achieve their stability and coherence through lines of connection between bodies, genders and (hetero)sexuality; she terms this triad 'the heterosexual matrix'. Historical and cultural variation within gender categories is explained through attention to the social production of gender in specific contexts. Variable, culturally constructed gender is overlaid on the 'invariable' sexed body; establishing and producing the duality of biological sex as natural or prior to culture (Butler, 1990: 7).¹⁷

Transgendered bodies disrupt this assumption of continuity between sexed bodies, culturally constructed genders and heterosexuality. Public space in general and urban space in particular is dominated by lines of connection between naturalised binary gender categories and heterosexuality (Brickell, 2000: 163; Myslik, 1996: 159; Valentine, 1996, Duncan, 1996: 137-139 Namaste, 1996a: 230). The heterosexualisation of space occurs through the positioning of heterosexuality as natural and universal. Heterosexual practices are omnipresent and invisible in public spaces (Phelan, 1993: 97). This dominance is not recognised, leading to claims that heterosexuality is not publicly flaunted (Valentine, 1993; Myslik, 1996; Brickell 2000). The heterosexual domination of public space constructs homosexuality and transsexuality as visible, unnatural, specific and out of place (Brickell, 2000: 165; Namaste, 1996: 226-228).

The construction of space in relation to unproblematic binary gender categories, however, is not recognised in the feminist geographical literature leading to a domination of theories about, and examples of, the (hetero)sexualisation of public

space (see McDowell, 1995, 1996; Valentine, 1996; Duncan, 1996). Instead it may be more productive to explore the way in which gender and sexuality intersect to exclude minority genders and sexualities from public spaces. Elaine, for example, experiences Newtown as a place where it is possible to be openly transgendered because the naturalness of heterosexuality *and* gender in this public space is not secured.

The politics of 'us' and 'them'

In Chapter Two I argued that narratives, corporeality and spaces make available certain subject positions to actors. Stories, contexts and bodies are important to the re(presentation) of a gendered self. The political dynamics of the spaces in which transgender stories are told and heard are indicated through local debates within the Sydney transgender community over who should represent and provide services for people with 'gender issues'. These debates illustrate the way that telling stories is a political process that is linked to relations of power that are context specific.

Transgender identities are constructed through binary oppositions, self and other, same and different, overlaid on place. Metaphors of the local and the global embedded in Elaine, and Wendy's narratives, discussed above, are also crafted in relation to the construction of heterosexuality as the dominant mode of identity and sexual practice and the construction of queer identities as subordinate or marginal. In Sydney, it is the geographical centre of the city - the inner city - that is the centre of expression for these marginal sexualities and identities. It is the heterosexual mainstream that lives on the margins of the city in suburbia. In the film 'Priscilla Queen of the Desert' (Elliott, 1994) mention is made of the inner city as a safe space for sexual minorities and people who are differently gendered. After Felicia/Adam (Guy Pearce) has been assaulted in the country town Coober Pedy in an act of homophobic violence, Bernadette the 'transsexual' (Terence Stamp) makes the following comments about the inner city of Sydney:

It's funny we all sit around mindlessly slagging off that vile stink hole of a city, but in some strange way it takes care of us. I don't know if that ugly wall of suburbia's been put there to stop *them* getting in or *us* getting out...

Bernadette - From 'Priscilla Queen of the Desert' - *italics my emphasis*

¹⁷ Thomas Laqueur's (1987, 1990) discussion of the cultural construction of the sexed body is discussed in Chapters Two and Seven.

In this extract from the film 'them' is the homophobic straight world that lives out there in suburban and rural Australia and 'us' are Sydney's inner city queers such as queens, gays, lesbians and transsexuals. The comparison is made in the film between places (rural Australia/the suburbs and the inner city) and the possibilities, or lack of possibilities, for the expression of minority identities in these particular locales.

In the following narrative Nancy describes the way that differences between suburban transsexuals and inner city transgenders mirror differences between those trans who are involved in transgender politics and those who are not:

There is a whole 'them' and 'us' mentality. 'Them' are transsexuals, who generally have the surgery, live in the suburbs as women and are invisible as transsexuals, don't want to be involved in transgender politics, and 'us' are the inner city trans, that resist surgery, live ambiguously between men and women, are visible as transsexuals and are involved in transgender politics. Of course, there are other trans that identify as transgenders who are not involved in transgender politics.

Nancy, MTF, 1996

According to Nancy, place of residence maps political differences between people who have transitioned across binary gender categories. Transsexuals live in the suburbs, they follow the medical model and tend to be 'secretive' or 'invisible'. Trans live in the inner city, they reject the medical model, choosing instead to be out and proud as transgendered people. But it is not simply that suburban transsexuals reject inner city transgender politics. Everyday locations assume the naturalness of binary gender categories and heterosexuality (Namaste, 1996a); their place of residence is more likely to inhibit the expression of minority gender identities. Choosing to be either/or rather than both/and may be simply a sensible strategy for surviving in the suburbs.

Anderson argues (1983: 19) that durable social groups, such as nations or communities, are crafted out of and against large scale cultural systems. The sex/gender distinction and the opposition between straight and gay are examples of 'large cultural systems' that are important to the emergence of transgender as a separate identity and as a collective social group. Discontinuities between biological sex and social gender often compel people to identify as transgendered and to seek out people who have similar experiences to themselves. Transgendered people have tended to congregate within urban areas that are identified as gay neighbourhoods and/or gay commercial areas because of a perceived greater tolerance for diversity

within these spaces (Perkins, et.al. 1994; Myslik, 1996; Namaste, 1996a). In Sydney the transgender community crafts its identity out of and against the straight and gay communities within which it is embedded. But transgender people are neither simply straight or gay, nor are they incorporated unproblematically into these communities. This is illustrated by Saffron's comments:

I find with the Mardi Gras, or anything, transgendered people are left right out. And I mean we should be able to choose to be separate from that community or included in it, and we have historically been very much included in gay and lesbian communities overseas... But still we have a very rigid section, the gay and lesbian and these other people who fit into that category somehow because they are show girls or they do that, and then there are just the hetros and they fit with their own name sort of. So it is coming from both sides, so called mainstream society or community out there and the gay and lesbian subculture, community or society, the transgender one seems to be even more marginal and copping it from all sides.

Saffron, (1997)

In Sydney the recent emergence of transgender as a political identity means that transgender identities, and their constructions of community, are crafted in relation to both of the gay and straight communities. Saffron suggests that transgender people occupy a doubly marginal position that is distinct from the straight and gay communities. Queer theorists (Seidman, 1994; Butler, 1990; Brickell, 2000) and theorists of sexuality (Hawkes, 1996) have noted that homosexuality is defined in an oppositional and subordinate relationship to heterosexuality. Homosexuality is that which is not heterosexual; heterosexuality as the privileged mode of identity and sexual practice remains silent or undefined. This idea is illustrated in Saffron's talk where she struggles to describe the heterosexual community - 'then there are just the hetros and they fit with their own name sort of'. Transgender identities are defined in relation to their difference from stereotypical gay and straight identities. These differences are sometimes chosen but more often than not they are imposed by others.

Saffron's comments about the way in which transgendered people have been left out of the queer community are set in the context of her observations about how Drag Queens were often the poster girls for the month long Mardi Gras festival, and their night-club skits are an important part of the entertainment. Yet their colourful contribution to this event was often unacknowledged by the powerful Sydney gay lobby. Recent attempts by two prominent lesbian groups to exclude 'non female-born lesbians' from participating in lesbian events and/or frequenting lesbian spaces also underpins Saffron's comments. Several of the people that I interviewed

cited the controversy over the Lesbian Space Project, a collectively funded meeting place and resource and community centre for lesbians, as an example of local discrimination against transgendered people. I thought at the time that they were describing to me something that had happened in the 1970s and it came as quite a surprise to find out that this incident had happened only the year before (1995).

In 1995 Dikes On Bikes Inc. (DOB) also attempted to prevent ‘the admittance of non female-born lesbians’¹⁸ to membership of the organisation. After passing a resolution to that effect, the decision was subsequently overturned at a full meeting held to discuss the issue. In this example, lesbian identified male-to-female transsexuals are defined by what they are not – that is not female-born lesbians. Both of these controversies received extensive coverage in the local queer press.¹⁹ This coverage combined with narratives about discrimination linked to the political activism surrounding the anti-vilification legislation enabled transgender people to reframe their experiences of discrimination in a different way – not as an individual problem but as a public issue.

Attempts by female-born lesbians to exclude non-female-born lesbians from lesbian spaces and events occurred alongside attempts by transgender ‘activists’ to have transgender people staff and manage the Gender Centre – a resource and community centre for people with ‘gender issues’. While transgender people were actively involved in criticising their exclusion from gay and lesbian spaces they were at the same time, using a feminist inspired rhetoric of providing transgender services designed by and for transgendered people, attempting to control their own space/place. These internal debates were made public in the letters to the editor column in the gay and lesbian press in the months prior to the election of the management committee at the Gender Centre. The debate in the letters to the editor column was initiated by Norrie May Welby’s letter published simultaneously in the *Sydney Star Observer* (*SSO*) and *Capital Q* (*Q*). An abridged version of the letter that was published in the *SSO* is reproduced below:

For too long, tranny welfare and health services have been run by non-tranys.

Despite what the doctors said about us all these years, we are not sick or disordered or dysphoric. What we are is mad! Mad that there are still other people dictating “what’s best” for us! Mad that the Gender Centre is still teaching other people that tranys are sick, disordered and dysphoric! Mad that non-tranys are

¹⁸ Kimberly O’Sullivan, ‘Green Light For Tranny Bikers’ *SSO*, 226:1 27.7.95.

¹⁹ Battle looms for dyke bikers, *SSO*, 13.7.95. Kimberly O’Sullivan, ‘Green Light For Tranny Bikers’ *SSO*, 226:1 27.7.95. LSP rises from ashes, *SSO*, 9.2.95. LSP gears up for major fundraising, *SSO*, 291:5, 22.2.96. Space Project Relaunched, *SSO*, 278, 15.11.98

running tranny affairs! Mad that they're keeping the tranny's who got anti-discrimination for us out!

The Gender centre should be managed only by tranns proud to be tranns!...

[W]hy should the Gender Centre be run and staffed by people who are not tranns, or by tranns who are ashamed to be seen as tranns... - 'Keeping us out', Norrie May Welby, *SSO*, no. 341, 1/08/96.

Contradictions between the self identity of transgendered people and the way that they are positioned or represented by others as 'sick' or 'dysphoric' were key to the political debates circulating in the community in 1996/97. Norrie May Welby's letter was interpreted by some people as advocating separatist policies for the Gender Centre (Jasper Laybutt, *Q*, issue 201, 9/8/96). The justification for separatism is set against Welby's claim that the Gender Centre is already practising separatist policies in relation to transgender 'activists' ('keeping us out'). In this narrative the transgender community (represented through reference to 'we' and 'us' in Welby's letter) is coterminous with a particular place – the Gender Centre.

Norrie May contests the meanings associated with this space through reference to broader issues that transcend place – such as the meanings that may be attached to transgender identities and to medicalisation. Norrie May Welby is a post-operative 'transsexual',²⁰ but s/he is also visible and political as a transgendered individual. Welby's stance on the medicalisation of transsexualism disrupts assumptions that transsexuals are uncritically accepting of the medical model. His/her words are written in anticipation of the AGM of the Gender Centre on September 23, 1996. Welby was a nominee for the Gender Centre management committee. Members of the Gender Centre were to vote for the management committee at the AGM. In this piece of politicking Welby draws on the 'gender card' in much the same way as conservative politicians use the 'race card' to garner publicity and votes in parliamentary elections. The letter opened a 'Pandora's box' of controversy that was fundamental to the way transgender communities are 'imagined' through constructed and contested boundaries between 'us' (tranns) and 'them' (non-tranns). Debates around issues of separation and inclusion within Sydney in 1996/97 are tied to the micro-politics of the sexed body (Jacobs and Fincher, 1998: 21-22) and articulated through divisions between non-tranny and tranny and between pre- post- and non-op. But Welby's letter was not simply a clever publicity stunt; his/her words underscored some personal concerns about the management of the Gender Centre.

²⁰ See Chapter Five.

Three incidents were behind the call by 'progressive' tranny 'activists' for the Gender Centre to be staffed by an 'all tranny team'. First, transgender activists claimed that educational literature generated by the Gender Centre, and targeted at the general public, referred to transys as 'disordered' or 'dysphoric' (Welby, *SSO*, 1/08/96). Second, the barring of selected 'out and politically active' anti-medicalisation transys from a public meeting with medical professionals at the Gender Centre in May 1996 was seen as setting an unacceptable precedent (Weekes, *Q*, 202 16/8/96). Third, there was concern about the outcome of Gender Centre consultation on a draft report into the treatment of tranny offenders within the criminal justice system. The New South Wales Anti-discrimination Board subsequently ruled that the report breached the Anti-Discrimination Act in ten areas (Welby, *Q*, issue 202, 16.8.96; O'Shea, *Q*, issue 207, 20/9/96).

Those opposed to a 'tranny take-over' at the Gender Centre, rejected separatist policies and argued for a Gender Centre staff that reflected diversity - as this diversity would cater for the needs of non-tranny partners and their families who also used the resources of the centre. A sample of the letters to the editor in the queer press, reflecting the range of issues discussed, is reproduced below:

With the issue of employing non-tranny staff, the argument against it harkens back to the dark days of separatism... An all tranny team, in my opinion, would result in an already marginalised and isolated group, having even less contact with the general community - Jasper Laybutt, *Q*, issue 201, 9/8/96.

In 1996 Jasper and his non-transgendered partner worked at the Gender Centre (*Q*, issue 203 23/8/96). George, whose letter appeared in the same issue of *Q*, was a volunteer at the Gender Centre:

The Gender Centre at Petersham is a resource centre for many different identity groups and individuals with gender issues. This encompasses those from cross-dressers to transgenders of all kinds, pre and post and non-operative transsexuals as well as their friends, lovers, both gay and straight.

The political stance, staff and resources of the centre needs to reflect the broad scope of the service. Therefore, it cannot be staffed exclusively by transys or cater exclusively for transys - "Norrie politics", George Andrews, *Q*, issue 201, 9/8/96.

It is interesting to note that in this debate 'tranny boys' tended to reject the call for separatism/positive discrimination and to favour diversity among the Gender Centre staff. Jasper's and George's associations with the Gender Centre were used to discredit their calls for diversity by implying that they had vested interests in the status quo (*Q*, issue 203, 23/08/96). Letters to the editor also recognised the

contribution that non-transgendered people have made, and continue to make, to the 'trany' community:

I in no way support any notion to exclude people on the grounds that non-tranys are not in a position to be beneficial to the 'trany' community - Sharon L. Stolzenberg, *Q*, issue 203, 23/8/96.

Responses that were critical of the call for transgender services designed for and delivered by transgender people emphasised integration over the marginalisation and isolation implied by separatism. Separatism is an important part of oppositional struggles. Linda McDowell (1996: 43) argues that '[s]eparatism is often associated with demands for a geographic space, a territory and the maintenance of mechanisms of exclusion and boundaries'. The need for services that are appropriate for pre-, post- and non-operative transsexuals also had to be balanced against co-operation with other relevant groups and organisations that provided support services to the general community. This made a separatist strategy difficult. Claim and counter-claim suggested impartiality and vested interest on the part of those opposed to an 'all trany team' (*Q*, 23/08/96) while the progressives were described as 'self-indulgent, self serving, individual and social anarchists' (*Q*, 23/08/96).

In the following letter, Jenny Taylor replies to Jasper's call for diversity and co-operation as a solution to isolation and marginalisation. Jenny argues that the community should be empowered to manage its own affairs:

Jasper seemed to be saying that tranys were too "marginalised" (read: oppressed) to run our own affairs, and that we need contact with the general community to sort ourselves out. So we can't have an "all trany team" at the Gender Centre... If I were to use the Gender Centre's services, I would expect to be dealing with a trany. Who else can understand what it is like to be a trany? Jenny Taylor, *Q*, issue 203, 23/08/96.

Jenny's narrative draws on an understanding of the way communities are imagined through shared experiences. She suggests that only people who have had similar experiences to herself are able to understand what it is like to be a trany. Feminist stand-point theory and a form of social essentialism may be identified in this narrative. Social essentialism, based on a commonality of identity and experience, is underpinned by universal claims to shared structures of oppression located in patriarchy, heterosexism and the unspoken normative requirement associated with gender and sexual difference (Butler, 1990: 14). For Jenny, these

structures of oppression may be understood only from the point of view of the oppressed – that is people who are transgendered.

The Transgender Liberation/Lobby Coalition²¹ which supported the move to get 'progressive' transgender people onto the management committee ('Battle for Gender Centre looms', Weekes, *Q*, issue 202:3, 16/8/96) attempted to downplay claims that TLC did not welcome 'non-transys':

We (TLC) welcome non-transys who respect our right to control our own affairs - 'Au contraire', Nadine Stransen, Co-Convenor, Transgender Lobby Coalition (TLC). *Q* 30/8/96 issue 204. P 6.

In a letter to the editor published at the end of August Norrie May Welby restated his/her position, albeit in a more reconciliatory manner. An extract from this letter is reproduced below:

Let's have all interested transys who support a transy community centre staffed by members of our community and promoting our community unite to find acceptable and forward looking solutions for our service provider, the GC - Norrie May Welby, *Q* 30/8/96 issue 204. P 6.

Norrie May Welby constructs unity among those who support a centre staffed by transys. She calls on transys who are not interested in a centre with exclusively transy staff to find a solution that is acceptable to both groups. These differences among transys were evident at the AGM on September 24, 1996 which was abandoned with different groups unable to reach agreement on policy or management committee staff (*Q*, 4/10/96). One correspondent in the letters to the editor column described the outcome of the meeting in the following way:

In such a small community such divisiveness undermines progress and community spirit... I have a message for both factions mellow out... - 'Gender let down', Laura Anne Seabrook, *Q*, issue 209, 4/10/96.

For Laura, solidarity is a prerequisite for political action. Debate and division undermine strategies for change. The process of constructing and communicating different ideas about being transgendered threatened the unity of the community. Occasional breakages, splinters and fragmentation, however, while divisive and painful are a sign of a healthy democratic process in action (Butler, 1990: 14-15). People who send letters to the editor of *Polare* write to an 'imagined community' of

²¹ In a controversial move TLC changed its name from the Transgender Liberation Coalition to the less confrontational Transgender Lobby Coalition around about the time that the 1996 Transgender Anti-discrimination Act was passed (*Q*, 203, 23/08/96). TLC was eventually disbanded in 1997.

people who share similar experiences. The letters to the editor column in turn sets the agenda for what gets discussed in the community (Long, 1958: 260), while also creating a sense of simultaneity, and collective time organised in this case around political action (Anderson, 1983). The debate played out in the letters to the editor column was part of a campaign for the tranny vote in the lead-up to the election of the Gender Centre management committee. These debates centred around which types of people are appropriate to represent, and provide services to, the transgender community (Gamson, 1997: 182).

Debates in the letters to the editor's column centred on the oppositions between same/different, unity/diversity, marginalisation/inclusion, dependence/independence, and emancipation/oppression. Those who advocated for positive discrimination and transgender services designed for and by transgender people focused on differences between transys and non-transys. Diversity within the category 'tranny' focused on arguments for and against the medicalisation of transsexualism. 'Progressives' followed a social model of transsexualism arguing against individual pathology and insisting instead that we live in a gender dysphoric society (Welby, *Q* 202, 16/08/1996; Weekes, *Q* 202, 16/08/96) - a rhetorical move that suggests an opposition between (transgender) community and 'society' (Agnew, 1989: 13).²² Those who argued against separatism emphasised diversity and co-operation. While they acknowledged the usefulness of the social model of transsexualism they also called for individual choice and the right for people to control their own bodies:

Transgender Liberation Coalition has removed the existing medical model that defined a transgender person... Now, those who present for gender reassignment are told they no longer have a medical psychological condition, so do not require any treatment... TLC's "solution" to the problem of their own making is to politically re-educate transys so that they won't want to have surgery or hormones - Linda Darling *Q*, issue 213, 1/11/96.

In 1996/97 ontological and public narratives about transitioning across opposed gender categories were contested through arguments for and against the medicalisation of transsexualism. The debates in the Sydney community at this time illustrate the way that subject positions are tied to spaces and to a person's corporeality. Transsexuals perceived that the subject positions offered in the narratives of the transgender 'activists' blocked access to their desired identities (in

²² This opposition between community and society is also embedded in meta-narratives about urban transformation within sociology. 'Tonnies' (1887) *Gemeinschaft/Gesellschaft* and Durkheim's *mechanique/organique* are examples (Agnew, 1989: 11).

material and discursive terms) as post-operative transsexuals. Debates over medicalisation were more pronounced in the 'street debates' - and it is to these debates that I now turn.

The call for separatist policies at the Gender Centre led to a battle of words between the two 'factions' on the streets of Newtown. The street battle was not subject to the editorial restrictions placed on letters published in newspapers. As a result they contained personal attacks on prominent people on both sides of the debate and plagiarism of cartoons such as the Wizard of Id (Figure 8). The street debate was carried out via a series of anonymous A4 double-sided flyers produced and distributed weekly under the title 'The Rainbow; The promise? One community - Great diversity'.²³ Political divisions tended to coalesce around differences between those who were politically involved and those who were not politically involved. These political identities were projected onto differences between those who identified as transsexual and followed the medical model and those who identified as transgender and rejected the medical model. Georgia explains:

As a clarification, a transsexual is a person who generally follows the medical model, lives in the role of the opposite gender to which they were born, takes hormones, generally lives as a woman, eventually has a sex change operation and often no-longer identifies as transsexual but as a woman. Transgender, is someone who lives as a woman, may or may not take hormones, and generally for whatever reason, financial, ideological or otherwise does not seek medical intervention. The concept is good to a point, but when one group of people try to force others to go along with their ideas of how you should be and act, then it becomes a problem, especially when those people are in a position to exert power over other transgenders who are not politically identified. People with an interest in transgender politics are subsuming transsexuals beneath that label, and they add to transsexual men who cross-dress. So transsexuals and cross-dressers are subsumed within the category of transgender to create a larger group of people in order to make claims on the state.

Georgia, MTF, 1996

Georgia assumes MTF when she defines someone who is transgendered. She resists pressure to define transgender in particular ways, but also operates with ideas which are not always inclusive. When talking to me about transitioning across binary gender categories Georgia foregrounds MTF experiences defining them in relation to the non-transgendered world. This perhaps reflects the fact that the body politic of transsexualism still tends to privilege the MTF experience.

²³ While I was living in Sydney I collected seven of these flyers.

One group, the self-appointed spokespeople for the silent ‘transsexual’ majority, perceived that the other’s ‘narrow sectarian policies’²⁴ were attempting to ‘negotiate away tranny health rights without any mandate to do so’.²⁵ Separatists were also charged with attempting to deny people access to sex reassignment surgery. This ‘fear’ was humorously represented by references in ‘The Rainbow; The promise?’ to people who supported the social model of transsexualism (such as members of TLC and Norrie May Welby)²⁶ as those who would have you all using string.²⁷ ‘The Rainbow; The premise?’ (a double-sided A4 flyer produced in opposition to ‘The Rainbow; The promise?’) sent up the arguments in the ‘Rainbow; The promise?’ stating that transgender activists did indeed have a hidden economic agenda indicated by their wholesale investment in string factories – a reference that speaks to male-to-female transsexuals only.²⁸ Female-to-male perspectives were conspicuously absent in these street debates.

In an open letter to the transgender community entitled ‘W(h)ither Transgender’, published as a double-sided A4 pamphlet, Lee Brown (8/12/96) outlined his/her concerns about the divisive politics within the community at that time. These concerns centred around the need to develop new community-approved standards of care for transsexualism, to challenge medical power/knowledge, to recognise and celebrate diversity within the community and to develop real alternatives to sex reassignment surgery. Brown writes:

The concept of unity in diversity is only a myth. If it is to realise the potential of the hype there has to be real dialogue and understanding between the pre-ops and post-ops, between passing and not passing, between transsexuals and cross-dressers, between self identified transgendered people and others who transgress gender norms. While there has been some effort in this direction the fact remains that what is described as diversity still looks like hierarchical difference.

(Brown, 1996)

These public narratives about differences within the transgender community may be interpreted as the outcome of tensions between old and new forms of (transgender) world-making - such debates are the key to creating communities

²⁴ The Rainbow No. 7, Summer, 96/97.

²⁵ The Rainbow No. 5, Summer, 96/97

²⁶ TLC, members of TLC, and those who opposed the medical model of transsexualism such as Norrie May Welby were represented in cartoons that were reproduced in the flyers.

²⁷ The Rainbow No. 6, Summer 96/97

²⁸ The reference to string refers to the practice of binding the male genitals with string and tape among pre-operative male-to-female transsexuals.

(Plummer, 1995: 18). The narrative identity approach discussed in Chapter Two located social action in the networks of relationships within which actors are located, and in the numerous cross-cutting story-lines with which people identify (Somers and Gibson, 1994: 67). Tensions surrounding the politicisation of identities within the inner city Sydney transgender community illustrate the way that social bonds, tacit understandings and political mechanisms operating within communities are never given but are open, contested and contradictory. In these debates the artifacts associated with print capitalism - newspapers, computers, the photocopier - provided the means for people to make different ideas about transsexualism and community accessible in public contexts. These ideas enabled/forced transgendered people who were differently positioned as pre-, post- and non -operative to reconsider and reassert how they might think about themselves (both individually and collectively) and relate to non-transgendered 'others' (Anderson, 1991: 36; Gamson, 1997: 179).

Narratives about transgender identity that were publicly available in Sydney connect to Anderson's (1983; 1991: 11-12) arguments about how communities are imagined through shared symbols, stories, social rituals, times and experiences. However, specific attention to the construction of community through difference and schism is missing from Anderson's account of the way in which collectivities are imagined. Debates in the newspapers and in the street flyers illustrate the way that boundaries within transsexual and transgendered communities are actively constructed and problematised through relational identities that operate on different local and national scales. The incompleteness or unrepresentability of the category transgender enabled these contests over meaning and identity to occur. Debates among transgendered people over political representation illustrate how differences are not additive - they cannot be solved simply by adding in various forms of difference to the category transgender. It is to an exploration of some of the similarities and differences between drag queens, transvestites, transsexuals and hermaphrodites within the inner Sydney transgender community that I now turn.

The politics of 'crossing' and 'passing'

Some social theorists (e.g. Kessler and McKenna, 1978; Woodhouse, 1989; Devor, 1989, 1993) and psychologists (e.g. Money and Walker, 1977; Bower, 1986; Bradley et.al., 1991; DSM VI, 1994; McConaghy, 1993; Green and Blanchard, 1996) have attempted to define boundaries between categories of people that they identify as drag queens, transvestites, transsexuals and hermaphrodites.

Such differences were also a source of cleavage within the Sydney community. Diane, for example, suggests that there is a hierarchy of identities within the Sydney transgender community:

They are not significantly important to me but there is a kind of hierarchy of positions within the transgender community. Certainly, there is a difference between each of those positions. Drag queens I don't personally perceive as having a gender issue particularly, or at all. It is perhaps much more likely for them that it is a kind of game. It is kind of a performance, it is much more likely to be a parody of woman than is the case for the transgender. The transgender is trying to make a connection to their womanhood. Whereas maybe the drag queen, and again this is going to be far too much of a simplification, but maybe the drag queen is sending up that position more than trying to adopt it. But, by the same token, drag queens are a lot of fun and I don't have any philosophical objection to what they do and what they are about. Some of them are quite stunningly beautiful, which is really annoying, though they work hard at it, they spend hours putting make-up on.

Diane, MTF, 1996

In Chapter Two I suggested that definitions create a hierarchy among existing meanings. Perceived differences between people who challenge binary gender categories also create a hierarchy among different cross-gender identities. The hierarchy privileges post-operative transsexuals over those who are pre-operative, followed by transvestites and drag queens. Diane is critical of this ranking and considers that differences between drag queens, transvestites and transgenders are unimportant. At the same time, Diane suggests that drag queens are different from transgenders because they do not have 'gender issues'. She argues that drag queens are men who perform gender and parody women, whereas transgenders have a sense that they are women. Jimmy also suggests that drag queens and transvestites swap gender for entertainment:

Drag queens are like entertainers...And I guess transvestites might be just one step further back from drag. To me a drag queen does it for entertainment. Like they will get around in jeans and have kids and wives maybe. You know they do it professionally, either to satisfy something in them artistically or it is their form of self expression. Or if he is gay well he might get around in jeans and boots when he is not performing – or maybe a frock as well – but he is doing it as creative expression. He is not a girl and he lets you know that. That's the commercial ones, I guess a transvestite may even do it for entertainment, and they may carry it over into their personal lives. But they have got some understanding in their minds – the division to them, or if there is a division or there isn't.

Jimmy, FTM, 1997

According to Jimmy, drag queens and transvestites may be differentiated from transgenders because unlike transgenders they do not make a distinction between their biological sex and social gender. In my own research I encountered people who talked about their identities and/or engaging in practices that troubled these definitions between transvestites and transgenders. Michelle, for example, considers that differences between transvestites and transgenders are minor:

Transvestites, my theory is that transvestites are not really vastly different to transgenders, but this is my viewpoint because others will argue significantly against this. Most people will suggest that a transvestite is a man who maybe wants to play a role sometimes but does not want to lose the fact that he is a man, and remains firmly set within that gender position. Whereas a transgender person is cross-dressing over that barrier and wants to be female or vice-a-versa in the case of FTMs. I'm more inclined to think that transvestites are just transgender people to a degree and that they are not prepared perhaps, or they are afraid, or they are unwilling to sacrifice, or make the sacrifices that are necessary to go past the point of being a cross-dresser. A lot of them are married, have children, jobs they want to protect, they have worked for, and when you are talking about changing your gender identity you are really having a massive impact on all of those things. So, I think if you can be comfortable and happy and stop at a certain point it is probably great, it is a lot easier. I identified myself as a transvestite for a long, long time, and it wasn't because I wasn't transgender, it really was because transgender was too hard. A transvestite you can do quietly in the closet and then no-body had to know. That in itself is a pretty awful place too, but it is not so life consequential.

Michelle, MTF, 1996

Michelle suggests that differences between transvestites and transgenders are social rather than psychological. Judith Butler (1993: 130) argues that in the ethnographic film about male-to-female cross-dressing *Paris is Burning* becoming a 'real' woman is constructed as the means of escaping from homophobic violence, racism and poverty. Michelle, in contrast, suggests that coming out as transsexual and/or claiming a transgender identity is precisely to expose yourself to poverty and discrimination. The marginality of the transvestite identity is indicated by her reference to the spatial symbol of the closet. The closet is a gendered space where Michelle performed her transvestite identity in secret. The space makes this subject position available to Michelle but the closet is also identified as a space that is created through fear and exclusion. Identifying as transgendered is equated with rejecting the 'safe' closeted world of the transvestite and 'coming out' into the public sphere and facing the consequences of that decision.

In the following interview extract Sally (a transsexual and drag queen), talks about the category 'drag queen':

I suppose even drag queens would agree that is a pretty open interpretation because often show girls are called drag queens, and there is a lot of diversity in that [category]. Like last night I did a show, right, and another girl was considering having surgery next year so she is on hormones. There was another person who was not on hormones and does not believe in those things herself. You would not consider her to be a transgender but a drag queen, drag artist, female impersonator and they are comfortable with that label. The other person [on hormones] identifies as being transgender, a tranny. There are other people [tranny drag queens] as well that have not gone and had the surgery. They [tranys] live their lives as women and that is the important thing. I think that is the difference there between [tranny and non-tranny] drag queens, a few of them are straight people who do drag, and gay people but they don't live their lives as women.

Sally, MTF, 1997

Sally suggests that there is a variety of transgender identities among the drag queens that she knows. Differences between people who cross binary gender categories are identified by their use of, or intention to use, medical technologies such as hormones and/or surgery. Distinctions are also temporal; full-time commitment to living in the gender that is opposite to their anatomy is considered to be one of the main differences between transgendered and non-transgendered drag queens.

In the following narrative, Diane introduces a biological difference between hermaphrodites and people who are transsexual or transgendered:

Hermaphrodites, I only know one or two, I have every empathy with them but they are not the same as transsexuals or transgender. In a very real physical sense that they are something quite different again. I mean we [transgenders] are generally one gender physically, but spiritually another. They (hermaphrodites) can lie very much in the physical in-between space as well and then searching out from that physical in between space to a gender identity space. I think that is a different set of problems that they have, and how they deal with that is often much in a similar fashion as a transgender. If they have been brought up a boy and perhaps should have been a girl then they will travel the same process. But there is a fundamental difference to them to start off with and they would be aware of that physically.

Diane, MTF, 1996

According to Diane, hermaphrodites are not the same as transsexuals because they are able to ground their identity *in* their bodies. She identifies hermaphrodites with an in-between space that is corporeal. Transsexuals or transgender people are

associated with an in-between space that is psychological or spiritual. For both transsexuals and hermaphrodites who transition across binary gender categories the process is the same. In the following narrative Andrew, a hermaphrodite who has transitioned from female to male, talks about differences between drag queens and transgenders within the transgender community:

Transgender is the same as transsexuals, just that is the politically correct word because you are not saying boy or girl it is just gendered. Drag queens give tranny girls a bad name, because to me they are really taking the mickey out of tranny girls. But at the same time for some girls it is just a profession, that is a different kettle of fish, they live the normal day as a man, whether gay, straight or whatever, and they are just making money. Hermaphrodite is what I am, do you know the only time that I remember I'm a transgendered person is when I've got to go to the toilet and I'm in a crowd and I then I think oh no I can't just stick it out. Other than that I actually forget, I've actually lived longer in my chosen gender than in the gender that was chosen for me...

Andrew, FTM, 1996

Andrew suggests that because he has lived longer in his chosen gender he is able to claim a legitimate identity as a male. Maleness has become part of his embodied *habitus*. The routineness of his masculine bodily practices is indicated through his reference to 'forgetting' (Bourdieu, 1990: 56).

The above extracts from my interviews explain why the Gender Centre has to be able to cater for people who transgress binary gender categories but do not identify as transsexual or transgendered. All of the people whose words have been used to discuss 'crossing' and 'passing' disrupt categorisation. Sally identified as a transsexual and she performed as a drag queen. Michelle and Diane had historical (cross-gender) identities as transvestites and current identities as transgendered women. Andrew claimed an identity as a hermaphrodite and as a tranny boy. The hierarchy within the transgender community places drag queens at the bottom followed respectively by transvestites, transsexuals, transgenders and hermaphrodites. This hierarchy is also temporal; drag queens and transvestites are thought to be less committed to a transgender lifestyle because their transitions across gender are temporary.²⁹ Transsexuals and transgenders have social and psychological reasons for living full-time in their chosen gender, while hermaphrodites are able to ground their gender identity in biological origins that precede the social.

²⁹ Temporal differences between categories are also noted in the psychological literature – see for example the DSM-IV, 1994; Bradley, et.al. 1991; DSM VI, 1994; McConaghy, 1993; Green and Blanchard, 1996.

Simplistic understandings about differences between drag queens, transvestites, transgenders and hermaphrodites were often problematised by the people that I interviewed. People claimed multiple identities - different identities became salient over time and as people moved through various relational spaces. The Sydney transgender population is also gendered. In the following section I explore some of the differences between tranny boys and girls³⁰ within the inner Sydney transgender community.

The politics of 'gender' and 'biology'

The often paradoxical relationship between deconstructing gender and the literal example of sex reassignment surgery is illustrated in feminist and sociological analyses of transsexualism.³¹ A number of feminist analyses and political positions on transsexualism suggest that sex reassignment surgery represents the embodiment of legitimating gender norms and the naturalisation of heterosexuality.³² These analyses often sit in tension with postmodern theories that use transsexualism as an example of embodied subjectivity to deconstruct the oppositional relationship between biological sex and social gender.³³ Arguments within the feminist, queer and transgender literature (Bell, 1993; Bornstein, 1994; Feinberg, 1996) to the effect that transgendered people disrupt lines of connection between social gender and anatomy need to take account of how gender operates within transgender communities. The transgendered community in Sydney is highly gendered. There is at times an uneasy alliance between FTMs and MTFs who have different interests and experiences particularly in relation to sexuality, surgery and passing. An example of the way that gender differences between tranny boys (FTMs) and girls (MTFs) may be used in a divisive way is provided in the following extract from a letter to the editor of *Polare* (14/1996):

I haven't included F2M's³⁴ (perspectives) as they didn't have any brains to start with' - Rachel Toft (MTF).

³⁰ Tranny boy/tranny guy and tranny girl are terms that were in common usage in the inner city transgender community in 1996/97. They were used by many of the people that I interviewed. I have reproduced this colloquial terminology in this chapter. 'Tranny boy'/'tranny guy' refers to female-to-male transsexuals/transgenders and 'tranny girl' refers to male-to-female transsexuals/transgenders.

³¹ I refer here to the idea that the origins of transsexualism lie within relations of patriarchal oppression and capitalist exploitation rather than in objective scientific medicine, see King, 1987.

³² See, Butler, 1990, 1993; Garber, 1993.

³³ See, Hausman, 1992; Butler, 1990; Epstein, 1990.

³⁴ In Sydney the use of F2M (female-to-male) and M2F (male-to-female) or FTM and MTF appears to be a matter of personal preference. I have chosen to use FTM and MTF throughout the thesis. In this chapter I use F2M and M2F when these terms have been used in the primary sources to which I refer.

Toft's letter criticises the Transgender Anti-vilification laws on the basis that the Government is excluded from complying with its own legislation. Her comment about 'F2Ms' is made at the end of the letter. Differences between tranny boys and girls reflect the gender dichotomies in non-transgender communities. This is discussed in the following extract from an interview with Jimmy:

There is a real tension between the FTMs and the MTFs that never gets aired or talked about. There is a perception among FTMs that they pass better than MTFs and perhaps some jealousy there among MTFs in relation to this. I've heard MTFs say that FTMs don't really know what it is like to be transsexual because they pass [more easily than MTFs].

Jimmy, FTM, 1997

Jimmy suggests that some FTMs see themselves as superior to MTFs because it is easier for them to 'pass' in their chosen gender. A perception that FTMs pass more easily among MTFs is used to imply that the FTM transgender experience is not equivalent the MTF experience - which is more likely to be exposed to the public gaze and therefore subject to discrimination and violence. In the following narrative, Angie, a MTF, indicates a lack of empathy with transgendered men suggesting that a woman with a penis is more acceptable than a man with a vagina:

If I was a male and I had a vagina I would be horrified. The penis is so important to masculinity, I don't think that you can have a male with a vagina it does not equate with male.

Angie, MTF, 1996

Biological differences between men and women were also used as a way to distinguish between FTMs and MTFs:

I often wonder what currency the menses have – both within the MFT and the FTM world. We FTMs are the first to make attempts to say – “Oh they never really worked properly” ... when the facts point to another reality. And yet, it is often amongst the first reasons we give when asked why MTFs aren't women. And then there is another thought that occurs to me – about how the menses process affects FTMs. I have had conversations with tranny guys whose period has either kicked back in or never stopped following transition. The effects of that process on their mind. One said to me : “I can't deal with the thought that there's bits of my body just falling out of me”. Have you ever accompanied a woman to an abortion clinic? When I accompanied a friend to an abortion clinic to have an abortion, that was something that I felt distinctly separate from and yet which seemed to me to exclude MTFs in a very finite way. When I reflect on this experience [of supporting a friend through an abortion] against the rather 'un-real' world of the MTF transsexual who at that moment, seemed to me to not have a clue about what being a woman or being female meant.

Adam, FTM, 1997

Adam suggests that there is a temptation to craft narratives about dysfunctional female bodies among FTM transsexuals. An infrequent or non-existent menstrual cycle may be seen as an attempt by some FTMs to ground their male gender identity in their biology. I also encountered narratives about dysfunctional male bodies among some of the MTFs that I interviewed.³⁵ Typically comments were made about inadequate penis size and/or impotence. Stories about dysfunctional bodies among transgendered people may be seen as attempts to construct a continuous gender identity that predates, and therefore justifies, their transition across binary gender categories. Adam also suggests that women's experience of menstruation, pregnancy and abortion demonstrates that there are fundamental biological differences between MTFs and female-born women. In this narrative the authenticity of MTF claims to female selfhood are questioned because women, as a result of their female biology, will have experiences to which MTFs will never have access.

Differences and connections between trans were also articulated on the basis of social gender and time elapsed since the transition. In the following narrative Andrew, a trans guy, talks about how he has more in common with Tony a fellow FTM and Tina a MTF who has lived as a woman for several years. He compares himself and others to another friend Lynne who has only recently started living as a woman:

There is heaps of support [within the community]. I don't know so much with the girls although Tina who is here, and Tony and myself, and Lynne I suppose, not so much Lynne because she is just starting out but Tina has been changed over 8 years now and her and I relate a lot because we are at a certain age, a certain level.

Andrew, FTM, 1996

In his comments above Andrew identifies himself with others on the basis of how long since he 'changed'. MTF or FTM is less important than stage in the process of transition. Discontinuities between the sense of community for trans boys and trans girls were also expressed in relation to differences between how boys and girls interacted with each other. Trans girls (MTFs) were seen as more social, trans boys (FTMs) tended to be more independent. Brad explains:

I notice the girls always seem to come together a lot, and sort of get really involved with each other and really going out together all the time, going to parties and stuff, and doing the dress thing and the make-up thing and getting

³⁵ See Melanie's narrative in Chapter Three for example. Robyn also grounds her female identity in her problematic biology - see Chapter Four.

really really involved. And the guys just sort of - we find it difficult to see each other once every six months. I don't see a real need to kind of get involved like the girls do. I can see myself getting along to a point and then just not really having anything to do so much with them any more. I said that to a group of guys because they were saying why do we all just disappear? I'd like to. And I just said well you get to a point you want to disappear, you know that is the whole point of doing this, to assimilate and just have a normal life, that is why you start this. We tried to get a boy's group get together maybe once every now and then, I mean I'll be into that, I'll go to that. I know I'll learn something there, or it'll be interesting just to be there and meet other guys and stuff. But I'm not too sure what we all have in common, that is the difficult thing.

Brad, FTM, 1996

Differences between boys and girls are expressed in relation to public narratives and stereotypical understandings of masculinity and femininity. Trany girls were more social, engaging in practices of femininity as a group. Trany boys were more self-reliant – a characteristic typically associated with masculinity. Brad, a gay identified female-to-male, is aware of his difference from other trany boys because he is not heterosexual. This leads Brad to question what trany boys actually have in common. This assumption of heterosexuality is indicated in Corey's narrative (below) where he conflates heterosexuality with the 'mainstream' and then corrects himself:

We started up a trany guys group called Jocks, but with the trany guys because they are so convincing without too much surgery, I mean facially basically there is no surgery required for trany guys, they don't associate. Trany's don't associate together socially, that is not what they are about. They are about changing gender and getting back into heterosexuality, the mainstream, not so much heterosexual, but the mainstream to blend in. And with guys they blend in so well you would not know. But we sort of have a get together every couple of months you know have a bit of a nag that is about it.

Corey, FTM, 1996

In this narrative gender differences are articulated in relation to passing and the types of surgery used by trany boys and girls. Corey suggests that trany boys are more likely to use transsexual or transgender as a transitional identity, returning to the mainstream when their gender identity is no-longer ambiguous. Unlike trany girls, trany guys do not tend to hang out together. They have to make a conscious effort to get together through formally organised meetings. This perhaps contributes to the relative invisibility of FTMs in the transgender community more generally.

The transgender community in Sydney does exist as a social group but it is a heterogeneous community. Michelle makes this point in her observations about the community:

The question of a transgender community in Sydney, there certainly is one, but it really is quite a disjointed community and also quite diverse. It is difficult to say that there is a transgender identity which is relevant to all transgenders. It is quite the opposite to that probably. There are not really two transgenders that are the same – the same as that would apply to ‘normal’ society – to use the word normal. So the sense of community, if there is one, is the fact that we are sharing a common experience if you like. But even in that we do it in vastly different ways, and that can range from some transgenders being quite empowered in the process to others who have drug and alcohol problems and all kinds of difficulties in dealing with the process. Also, there are all kinds of different ideas about what the outcomes might be, and what they are striving for and what they are hoping to find perhaps in the process. So a community sense in terms of gathering together and that sort of thing does happen to a degree, but there are a lot of people who will purposely stay outside that community, who don’t want to be involved. I think my experience tends to suggest that mostly people who do get involved in the community do so in terms of the need for support rather than a desire to be a transgender member of a transgender community.

Michelle, MTF, 1996

Michelle suggests that every transgender person is different. These differences reflect the sort of diversity that is found within the wider non-transgendered community. Unlike the gay or lesbian community, the transgendered community is not organised around a single all-inclusive identity category. Community is articulated through sharing a common experience. However, these experiences differ from individual to individual. Michelle emphasises the value of the use of community to individuals as a source of information, social contact and support. She suggests that people who access services within the community may not necessarily identify themselves as transgendered members of a transgendered community.

The ‘imagined’ transgender community

The focus of my research was transgender identities – in this regard the thesis was set up to acknowledge and explore diversity. Even so, the categories under investigation fragmented into a lot of disparate individuals who, on close investigation, appeared to have very little in common. In Chapter Four, for example, I discovered through my interview with Robyn that she was someone who was

biologically transgendered masquerading as a socially transgendered MTF in order to connect with people and access services.

Inner city transgender community politics in Sydney during the spring and summer of 1996/97 illustrates many of the contradictions associated with the use of identity categories. The identity categories typically associated with gender, sex, sexual orientation and transsexualism, are simultaneously fixed and fluid, strategic and given, forced and chosen. This chapter, and the previous chapter, indicates that differences between transgendered people occur on the basis of geography, nationality, place of birth, politics, anatomy, class, ethnicity and combinations between social gender and sexuality. These differences may be appreciated only after careful attention to events and narratives collected through interviews and research in the field. The diversity within the transgender community problematises the categories with which transgender people identify and the notion of an internally coherent community. At the same time, public narratives draw on notions of community as if the category itself is self evident, coherent and unambiguous. The diversity within the inner city Sydney transgender community in 1996/97 illustrates the ways in which identity categories are not homogeneous and unvarying, but instead are diverse and unstable in ways that make representing them analytically complex and challenging.

I entered the research field in mid-October 1996 at a time when the political divisions within the community had migrated from the letters to the editor's column to the streets of Newtown. The debates were complicated and confusing to a person who at that time had no historical memory, or understanding, of the divisions within the community. Feelings in the community were 'raw' leading to the problems associated with asking interview participants the questions about community that I had prepared before going to Sydney - see Chapter Three. Goffman (1989: 128) suggests that in order to find out about internal cleavages you have to be strategic about how you manage social relationships. He suggests that researchers try to triangulate what people are saying with actual events - not as an interviewer but as a witness to how people react to what is going on around them. Familiarity with the local knowledges and debates presented in this chapter was made possible by actually living in the area of study. The politics and divisions within the Sydney transgender community were initially intimidating to an outsider such as myself. Evidence of the divisiveness of the politics that I encountered in 1996/97 was implicitly presented in editions 22, 23 and 24 of *Polare* which were

published with the message “diverse and united in 1998” on the front cover. This message is interpreted differently by people who actually lived in the community and heard the sometimes acrimonious debates, by people who followed the more sanitised version of the debates in the press, and by people who read the cover without the knowledge of the political basis for the slogan’s origins.

Anderson (1983, 1991) explores how communities are imagined through narratives about simultaneous participation and sameness. The Sydney transgender community is also ‘imagined’. Unity is constructed through words, images and shared narratives, times and experiences. This unity is struggled for in moments of stark division. Within this community space and place are vital as a sites for activity and as a symbols of difference and connection. Divisions within the community in 1996/97 were aired publicly in the identity politics associated with the Gender Centre. The community is also a resource for articulating differences between pre-, post- and non-op, between MTF and FTM between those who identify as heterosexual and those who are lesbian or gay. The Sydney transgender community is not exclusively imagined through narratives about sameness. Attention to how community and unity are simultaneously constructed and deconstructed through difference and schism highlights the complex social processes through which minority communities are imagined. Investigation of the Sydney transgender community highlights differences as well as connections between people who transition across binary gender categories. These differences and connections are simultaneously personal, local, national and global.

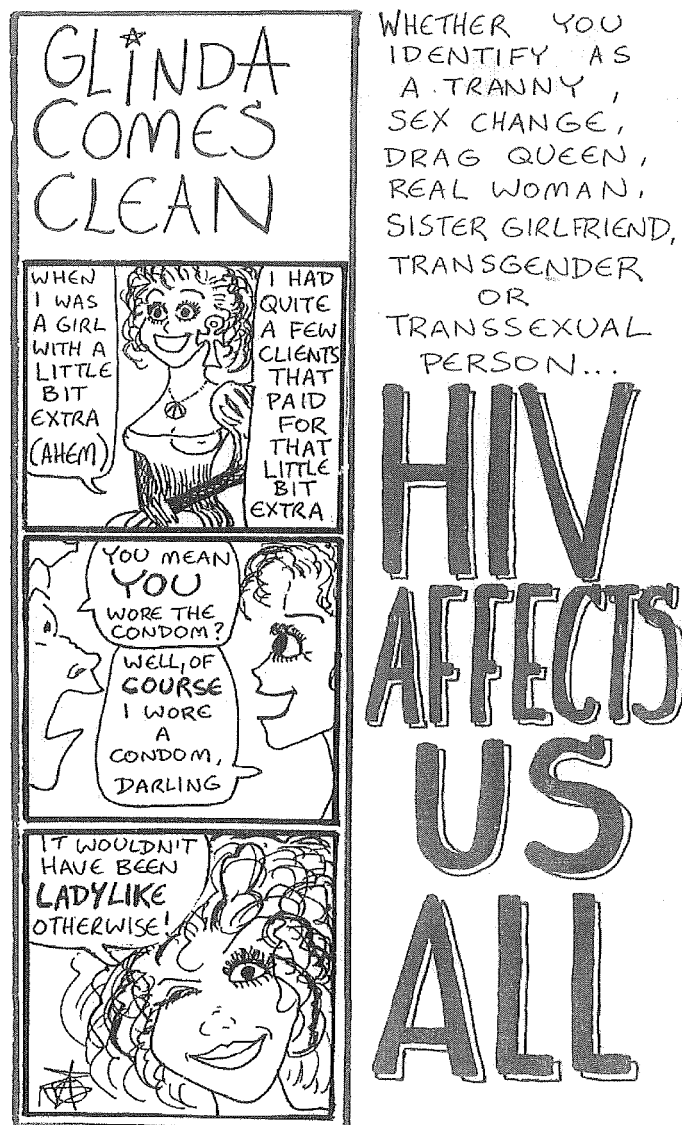
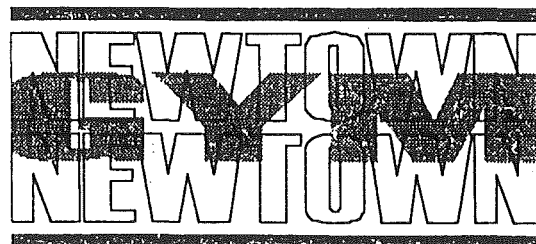


Figure 1. 'Whether you identify as a Tranny, Sex Change, Drag Queen, Real Woman, Sister, Girlfriend, Transgender or Transsexual person HIV affects US ALL'. This safe sex pamphlet provides a sense of the range of identities within the Sydney transgender community (Produced by Norrie May Welby, 1992, on behalf of SWOP [Sex Workers Outreach Project] in association with ACON [AIDS Council of NSW]. Funded by the NSW AIDS Bureau).

FAGS
DYKES
STRAIGHTS
TRANNIES

And that's just the staff...

*Every Body
Feels at Home at*



294 KING STREET (FIRST LEVEL)
(ACROSS FROM MCDONALDS)
NEWTOWN 2042
TEL: (02) 9519-6969
OPEN: MON-FRI 6AM-10PM SAT-SUN 8AM-8PM

Figure 2. FAGS DYKES STRAIGHTS TRANNIES. And that's just the staff... Every Body Feels at Home at NEWTOWN GYM'. This advertisement uses humour to communicate the diversity of its staff and therefore by implication the membership characteristics of the Newtown Gym (Source: CQ, 9/08/1996).

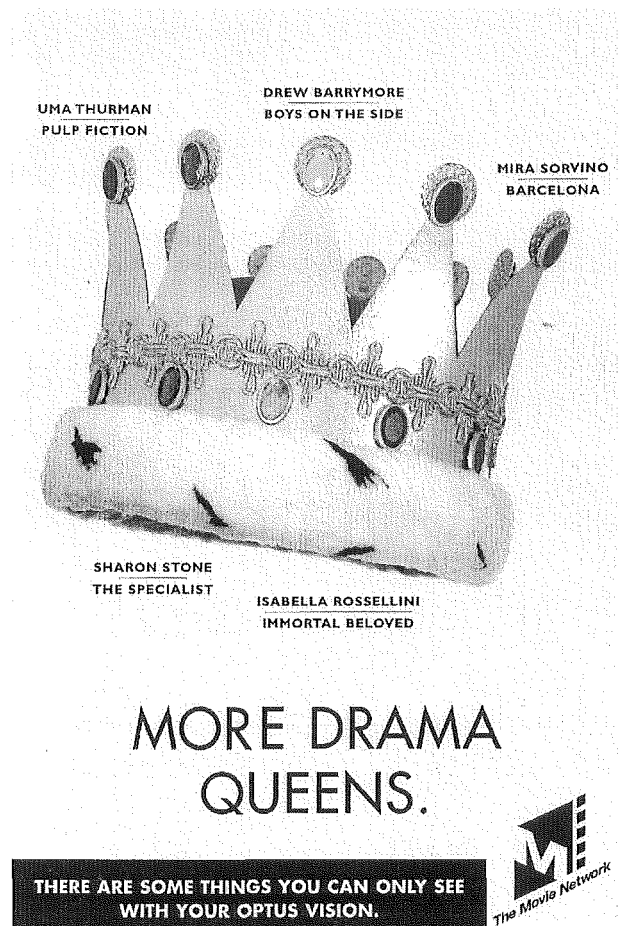


Figure 3. Corporate advertising acknowledges Sydney's emerging queer communities in this example of the Optus Vision Movie Network 'More Drama Queens' advertising postcard (Avant card, Australia, 1996).

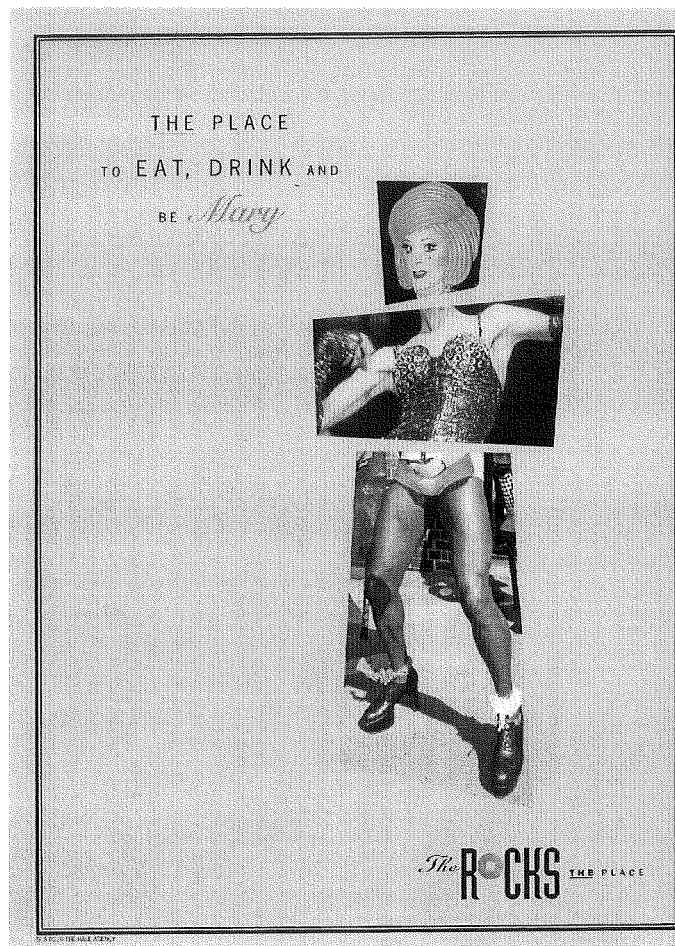


Figure 4. The Rocks. The place to 'Eat Drink and BE *Mary*'. MTF cross-gendered identities are 'imagined' in this advertisement for an up-market shopping and restaurant area (Source: Gay and Lesbian Mardi Gras Festival Guide, 1997: 80).



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Figure 5. This 'Telstra' advertisement is aimed at an imagined queer community both within the company and in the public sphere. The text on the second page of this advertisement reads 'We Like Coming to the Party. You've probably seen friends wearing out t-shirts and baseball caps at Sydney Gay & Lesbian Mardi Gras. And you've probably seen our Phonecards™ and you may have even run into some of the members of our gay and lesbian staff association, Crossed Lines. (If you have, please return them to us in good condition)...' (Source: Gay and Lesbian Mardi Gras Festival Guide, 1997: 2-3).

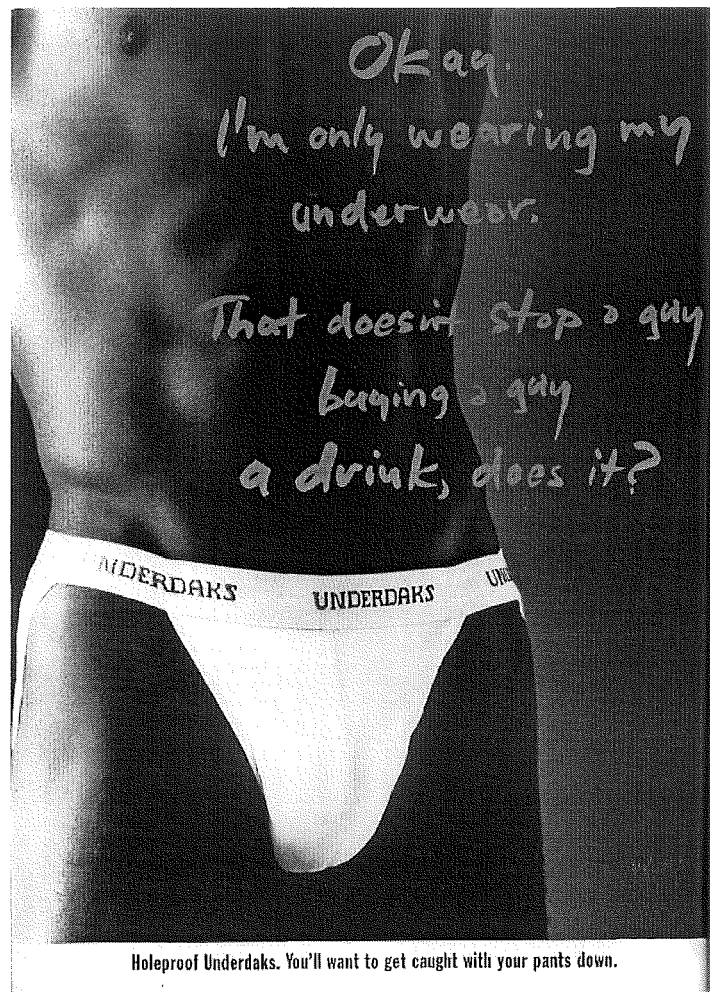


Figure 6. 'Holeproof Underdaks. You'll want to get caught with your pants down'. This advertisement appeals to an 'imagined' gay male reader (Source: Gay and Lesbian Mardi Gras Festival Guide, 1997: 34).

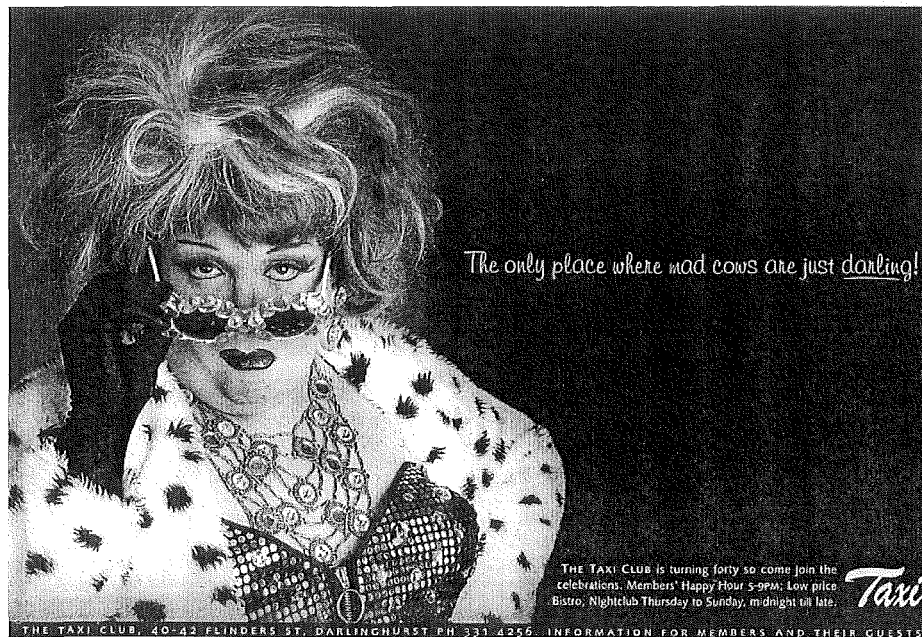


Figure 7. In Sydney bars and cafés frequented by openly transgendered people tend to be in the inner city suburbs of Darlinghurst and Newtown. In this advertisement the 'Taxi Club' nite-club in Darlinghurst 'the only place where mad cow are just darling' celebrates its 40th birthday. (Source: *CQ*, issue 193, 14/06/96).



Figure 8. The Wizard of Id. This cartoon, written over with references to the Gender Centre (GC) and anti-medicalisation tranny activists, was printed on the back of issue number seven of the street flyer 'The Rainbow; The promise? One community - greater diversity'.

Placing narratives in space and time

Conclusion

I have sketched two contrasting stories freely circulating at the end of the twentieth century: *a narrative of polarised gender*, one which finds communities in the past and draws upon them to assert the power of dualistic gender in our lives for the future; and *a narrative of abolished gender*, one without much of a tradition to draw upon, but which seeks to provide new stories of the ways in which lives can be lived without the 'tyranny of gender'. There are many positions in between and all the stories need telling.

- Ken Plummer (1995: 158) *italics in the original*

Stories construct selves but they are also specific to time and place. New ideas and possibilities for action are made available in different relational settings. This thesis has been about locating shifting gender identities in the micro details of individual lives, and in the communities of the people that I interviewed. Chapters in the thesis have artificially distinguished between what was occurring simultaneously in local and national settings. Sociology entails an analysis of multi-dimensional networks where all of these things are in play. This chapter concludes the thesis by attending to these networks and outlining how key concepts have been used across the thesis.

The individual stories presented in this thesis connect to debates in transgendered communities and to the broader analytic agendas about agency, selves and identities. People who transition across binary gender categories consciously locate themselves, both metaphorically and bodily, in public narratives of sex, gender and sexuality. They have experiences of managing bodies and identities that confound conventional discourses associated with sexual difference. The challenges associated with keeping a particular narrative of identity going while occupying a body that is differently sexed have provided an opportunity for a critical exploration of the relationship between sex, gender, sexuality and the narrative construction of identities.

The analyses presented in the thesis do not apply just to people who have transgendered bodies; they contribute to the literature on embodiment more generally. Contemporary social theorists of embodiment observe that recent attention to the body in mainstream social theory and in post-structuralist feminist thought has not tended to result in theories of the body that explore the concrete embodied practices of people in specific historical, social and cultural contexts (Davis, 1997: 13-15; Williams and Bendelow, 1998: 35, 127; Jackson and Scott (2001: 10-11). This thesis has attempted to contribute to a corporeal sociology of the body. Critical interrogation of dualistic understandings of sexual difference has occurred alongside careful attention to the particularities of embodied experience, situated knowledges and local practices. In this regard, the analyses of difference, normalisation and subversion presented in the thesis could also be applied to bodies that are differentiated in relation to sexuality, ethnicity and disability. My investigation of the way that bodies are regulated through state policies and practices could be applied to the lives and experiences of refugees/migrants, lesbian women, gay men and people who are disabled. Attention to the narratives of people who transition across binary gender categories has enabled an investigation of how embodied experience is mediated through cultural representations and in social interaction. Throughout the thesis I have argued that it is not just discourses but also spaces, places, times, stories and bodies that make subject positions available to actors. I would like to conclude with some final reflections on how I have used each of these concepts across the thesis.

Place and space

Narratives are embedded in place by the stories through which people constitute their identities. I have argued that place-based identities are tied to the micro-politics of the sexed body. In Chapter Eight, for example, I explored the relationship between the local and national context in the construction of gendered citizenship in New South Wales, Australia. In this case, localised gender identities, differentiated by place of birth, are constructed through non-local state and federal legislation that specifies how the sex designation on the Births, Deaths and Marriages register is to be regulated and administered in different state and national settings.

Transgender identities are not only constituted through national and international processes but are also tied to local places (Plummer, 1995: 149). This thesis has explored the internal dynamics of spaces through attention to physical locations – workplaces, restaurants, hairdressing salons, beauty salons, urban

streets, stages, conference venues and the Sydney Gender Centre. These social locations facilitate or inhibit stories, embodiment and the practice of narrativity. Sets of understandings about sexual difference are also constructed within broader patterns of inclusion and exclusion that shift and change according to particular times and spaces (Jacobs and Fincher, 1998: 21-22). There are different possibilities for, and limitations on, claiming transgendered identities in different urban locales. These possibilities vary over time and between and within cities. In the film 'Priscilla Queen of the Desert' a comparison is made between places (rural Australia/the suburbs and the inner city) and the possibilities, or lack of possibilities, for the expression of minority identities in these particular locales.

Place was also a significant element in my construction through fieldwork of transgendered community practices. I problematised ideas about communities and common territory by looking at the way that individual identities, and communities, are constructed in relation to broader social configurations that are not tied to place. Place introduces heterogeneity and difference into the categories 'transsexual' and 'transgendered'. Some of the people whom I interviewed talked about differences in the range of possibilities for claiming transgendered identities within Australia and between Australia and the United States. In these examples, narrative identities have different interpretations whereby particular meanings, and struggles over identity, become salient in different relational settings. Drawing on the concepts of time and place within Anderson's (1991) arguments about how communities are 'imagined', I explored how the inner Sydney transgender community is constructed through unity, difference and schism.

The politics of the spaces in which narratives, events, identities and experiences are at play has been a theme that I have considered throughout the thesis. My research indicates that stories and identities are constrained by the internal dynamics of the spaces in which narratives are told and heard. Through attention to the spatial aspects of narratives I explored how stories and identities shift and change according to the spaces and times in which they are embedded. Narratives are shaped by the spaces in which they are articulated (Plummer, 1995). They are also constrained by the politics of the spaces in which stories are expressed and received. The construction of space in relation to unproblematic binary gender categories is not recognised in much of the feminist geographical literature leading to a domination of theories about, and examples of, the (hetero)sexualisation of public space (McDowell, 1995, 1996; Valentine, 1996; Duncan, 1996). Transgender people illustrate the way that heterosexuality *and* gender are assumed

in public space. I have argued it may be productive to explore the way in which gender and sexuality intersect to exclude minority genders and sexualities from public spaces.

Locating stories in time

Narratives, state records and communities are located in multiple and overlapping dimensions of time. Time is linear, cyclical and embedded in the flow of lived experience. Metaphors of time are embedded in individual stories about action and identities. The temporal dimensions associated with agency are indicated in references to past, present and future in the talk of some of the people that I interviewed. Most of the pre-operative people that I talked to experienced their present identities as fragmented and incomplete. A desire for genital surgery, and/or unambiguous post-transitional identities, was often articulated in relation to aspirations for a future identity in which their anatomy and social identities were consistent. At the same time, they acknowledged that surgery and/or 'passing' would not change their identities. This is because identities are historically continuous. Past experiences of a life before surgery shape their orientation to the future. Life histories also explore how the past influences the present by using the present to reflect on the past. In Chapter Four, Robyn told a story about how the present enabled her to craft new stories about his/her past. She overtly re-interpreted his/her history in light of new knowledges about his/her body. Robyn claimed a biological and social identity as a woman and he retained a male identity as a son and father. Robyn's history ensures that s/he will always be both male and female regardless of his/her social gender.

The personal histories of transgendered individuals also complicated the administrative distinctions between male and female bodies on the New South Wales Births, Deaths and Marriages register. State recognition of transgender bodies and identities is incorporated into existing policies and practices through administrative strategies that attempt to maintain dualistic understandings of sexual difference. Place of birth refers to a specific locale situated in time. The births register is located in conventional linear time (time of birth and time of re-issue for change of sex). At the same time it enables the organisation and transfer of information through time and space. A post-operative transsexual, who secures a change of sex to reflect their chosen gender, has two birth certificates. Their personal history and state records reflect the fact that they are able to claim an historical identity as one sex and a current identity as another – in this sense they

are both/and. As a result they may have a multiplicity of identities within a single data base. For post-operative transsexuals the birth certificate acts as an archive for the conservation of traces (of a previous identity) that enables movement backwards and forwards through space and time.

Stories and identities emerge from interaction, shifting and changing according to the spaces and times in which they occur. The possibilities for claiming transgendered identities vary over time. For example, differences and connections between trannies were articulated on the basis of time elapsed since their transition. Communities are also constructed through imagined connections between collective and chronological times. Benedict Anderson argues that group continuity and shared social meanings are constructed through the interaction between the daily lives of individuals and the collective time(s) of the community. Time, symbolised in mundane artifacts such as the daily newspaper, clock and calendar, is chronological, progressive or linear. Calendars and newspapers are important to the construction of collective times and identities as they record the significant annual events in which an individual and community participates. The narratives of the people who participated in this research were shaped by their location in a particular temporal and spatial field where complex social and political redefinitions of sex and gender are in play.

Narrativity

I explored the destabilising spatial, temporal and relational aspects of narratives by drawing on Somers' ideas about narrativity and narrative identity. Somers pays attention to differences in narratives across geographic space, while Plummer's work explores the social spaces in which stories are expressed and received. I argued that narratives and spaces are also unstable and relational as both are constituted by and constitute social processes. Narrative identities are never complete; they are always in the process of being formed. In this sense, identities are embedded in an ever unfolding flow of social relationships that shift over time and space. The social dynamics of space are indicated by its gendered and sexualised dimensions. An analysis of sexed identities that includes the specificity of relational settings and shared narratives is able to capture the complexity of the lived worlds of people who identify as transgendered.

Somers' focus on reinterpreting historical data means that consideration of the dynamic aspects of inter-personal social encounters is largely absent from her

analysis. Davies and Harre's (1990, 1999) work on positioning was used to explore how people orient themselves in relation to their experience of interactions, practices and the public narratives embedded in conversational story-lines. People construct identities, however multiple and changing, by locating themselves or by being located in stories or public narratives that shift over time and space. Some stories presented in the thesis, such as Robyn's, illustrate the foundational importance of biology to narrative constructions of selves. Others, such as Norrie May Welby, have offered stories that highlight identity construction as an overt part of the story-telling process. In these narratives stories about selves are never complete because they are always in the process of being made (Benson, 2001: 49).

People who are in the process of transitioning across gender categories are acutely aware of their own gendered subject position and the way that they are positioned as male and female in conversations with others. The different ways that people who are transgendered position themselves, and are positioned by others, illustrates the complex ways that identities are negotiated in everyday social encounters. Their narratives also indicate that positioning is not just a conversational phenomenon; subject positions are also tied to the internal dynamics of spaces - hairdressing salons, restaurants, beauty salons, stages, workplaces, and bedrooms - and specific bodies. Many of the people whom I interviewed wanted to position themselves physically as a gendered person (or as both/and or neither gender in Welby's case) rather than just through words or conversations. My research suggests that subject positions offered in conversations are not exclusively discursive, or performative, but are tied to a person's corporeality. Understanding narrative identities as embedded in the politics of spaces, cultural representations, public narratives and relationships to others foregrounds the active, fluid, contingent and social nature of stories and subjectivities.

Corporeality

Attention to the situated dimensions of social interaction suggests that it is not just spaces but also discourses and corporeality that make certain subject positions available to actors. Throughout the thesis I have paid attention to the way that corporeality may inform choices and shape action and identity. Conversations with transgendered people have provided some insight into the way bodies impact on action and identities. Transgender identities are the outcome of a complex interaction between corporeality, culture and subjectivity. They are managed in the context of occupying bodies that confound conventional discourses associated with

sexual difference. The liminality of people who identify as transsexual or transgendered allowed them to reflect on the relationship between gender identity, corporeality and medical technologies. I explored contradictions and ambiguities associated with transgender embodiment through research informants' narratives about the relationship between identity, corporeality and gender reassignment technologies.

Some of the people that I interviewed used the body as a resource, while others experienced it as a form of constraint. Robyn and Nick's decisions to change their social gender, for example, are grounded in new knowledges about their physiology and 'felt' in their experiences of bodily changes. Norrie May Welby used his/her corporeality to demonstrate the interchangeability of sex and gender. Forms of embodied corporeality - voice, gestures and movement of the body - were employed to trouble public narratives associated with sex and gender and to draw attention to the social fields through which gender is inscribed in the body and institutionalised as naturalised difference. The 'natural' anatomical bodies of intersexed children were used by some transgender activists as a resource for questioning cultural, medical and institutional categories of sex and gender and the forms of social exclusion that these categories legitimate. In these examples, transgender narratives, bodies and identities are problematic because they blur the boundaries of sexual difference in ways that lay bare the processes through which inclusion in one category is dependent upon exclusion from its opposite.

Moira Gatens' arguments about the body politic were extended through consideration of the way that the gender identities of transgendered people were administered by a modern state. In New South Wales sexual citizenship for post-operative transsexuals is constituted through the consumption of gender reassignment technologies. Within this legislation, transgender people are identified with the body in so far as the body is understood as the site of these inscriptions. Transgendered people, like homosexuals and disabled people as 'other' within the body politic, attract state interventions that would not be tolerated in other areas of social life.

Transgendered people also spoke about how inconsistencies between their corporeality and their narratives about self impacted on action and identity. Nick, Jimmy, and Jack talked about the way that their identities were constrained by a perceived lack of surgical options for FTMs. In the bedroom, for example, Jack's male identity was disrupted by his lack of a penis. Michelle, Jane, Anita, Mary and

Angie talked about the difficulties that were associated with maintaining a feminine identity while their anatomical sex and social genders were inconsistent. Being pre-operative meant that Angie felt that she was also unable to actively take up the identity of 'straight female'. In these narratives forms of selfhood were disturbed by bodies that did not conform to certain expectations. The solution was that bodies should therefore be 'brought into line' by surgery. Medical technologies provided the resources for Michelle, Jane, Angie and Anita to become embodied subjects through changing the relationship between their bodies, gender and sexual identities.

The narratives of transgender people illustrate that bodies impact on the discursive positioning of selves. For many transgender or transsexual people identities are simultaneously discursive and corporeal. It would be impossible for transgendered people to tell the stories presented in the thesis without having had the experience of occupying bodies that are in some ways problematic. This suggests that access to the contradictions and ambiguities associated with the agency of transgendered people necessitates attention to the messy materialities of bodies.

Agency

In Chapter Six, I explored how liberal humanist understandings of agency connect with post-structuralist constructions of agency that focus on the way agency is produced by (humanist) discourses that constitute subjects as active agents. I argued for an understanding of agency that draws on agents as strategic and knowledgeable actors and embeds agency in the temporal and personal aspects of experience. Exploring the agency of people who engage in medical technologies for crafting gender also requires that the relationship between corporeality and identity be acknowledged.

The assumption of embodied continuity in common-sense narratives is potentially problematic for many transgendered individuals who experience significant discontinuities between their corporeality and their gender identity. A lack of attention to the relationship between embodiment, identity and action, as well as to the corporeal limits of some bodies, is also evident in some sociological debates surrounding agency. In some post-structuralist accounts of agency and subjectivity the body also tends to be unproblematically presented as a natural template on which understandings about sexual difference are inscribed. Specifically individual actions become products of discourse in ways that tend to

ignore the corporeal limitations of some bodies. In the thesis I have considered how embodied experience interacts with discourse, meaning and subjectivity to frame individual actions. I have argued that bodies are not simply positions in discourse or the product of social practices; on the contrary, it is through an individual's experience of the interaction between their flesh, forms of inscription and their intentions, that bodies come to have personal significance and meaning.

The medical and academic literature used in critical analyses of sex change surgery tends to offer a dominant reading of this practice. Within these analyses transsexual desires for, and uses of, gender reassignment technologies are tied to hegemonic relations of medicine, gender and sexuality. A lack of attention to the diversity of positions among those people who chose to surgically alter their body leads to a homogenised account of transsexuals and their location in medical discourses. Transsexuals who access medical technologies are granted a degree of agency by analysts that is rarely given to women using cosmetic surgery. However, rhetorics of medical violence, danger and control tend to construct people who engage in elective surgical alteration of the body as passive casualties of larger external processes. These analyses position transsexuals who use medical technologies as cultural dupes rather than as active negotiators with the medical profession over their health care. Transsexuals' accounts of their actions suggest that they simultaneously collude with and resist the reconstruction of the body in relation to norms of gender that are embedded in their own and in medical narratives about the relationship between anatomy and social gender. Transsexuals provide a good example of how people can construct themselves as active agents through choosing to remake themselves in various ways. Transsexual agency is also constrained within the context of a variety of institutional regimes and normalising assumptions and practices that are constructed and inscribed within medical discourses and reinforced through public narratives about lines of connection between sexed bodies and identities.

Narratives of gender and practiced embodiment

In the quote that begins this chapter Plummer (1995) contrasts 'a narrative of polarised gender' with 'a narrative of abolished gender' and embraces the need for stories of lives that escape 'the tyranny of gender'. This thesis suggests that the project of 'abolishing gender' was not embraced by the people I spoke to who identified as transgendered. Even Norrie May Welby, who embraced gender ambiguity, also utilised gender difference. What their stories and analyses illustrate

is the strategic crafting of gender in particular contexts using skilful practices. These practices are both collective, invented and reworked in specific places, spaces and moments in time. This thesis has attempted to demonstrate the complex social processes associated with the accomplishment of transgender identities and how they might be analysed through attention to bodies, spaces and the practices of narrativity.

Research Appendix

1. Information Sheet
2. Consent Form
3. Interview schedule

'Transgendered'/'transsexual' identities and gender reassignment surgery

University of Canterbury

Department of Sociology

Information Sheet

You are invited to participate in a PhD research project which explores what transgendered people have to say about changing one's gender identity and gender reassignment surgery. Those participating in the study have been contacted through networks in transgender communities.

Your participation in the project will involve an initial interview. Some of those interviewed will be asked to participate in further discussion of issues surrounding transgendered identities and gender reassignment surgery. You can decide at that time whether you want to continue to be involved in this research.

The initial interview(s) will discuss how transgendered people negotiate gender both inside and outside the transgendered community. You will also be asked for your views on sex reassignment surgery. Magazine articles which attempt to represent the experiences of transgendered/transsexual people will be used in these discussions. You may want to talk about your own experiences, however, you are not obliged to do so in this interview.

Should you agree to an interview, a copy of the interview questions, as well as information about the magazine articles to be discussed, will be made available to you prior to the interview.

You are assured of the complete confidentiality of any information gathered in this investigation. The identity of participants will not be made public. You will receive a copy of the interview transcript and will have the opportunity to change this record of the interview or add anything to clarify your views. No information that could identify individual participants will be included in the transcripts or any documents that may be published, including the PhD thesis. The transcript of your interview will not be made available to a third party without your explicit permission.

My name, contact address and phone number are as follows:

Suzanne Phibbs
Department of Sociology
Private Bag 4800
Christchurch
NEW ZEALAND

Telephone 3667 001 ext. 8197 (University)
3528 844 (home)
email: soci062@canterbury.ac.nz

From October 14 until December 23 1996 I may be contacted at the following address (e-mail and telephone number to be advised).

Women's Hall
University of Sydney
Sydney NSW 2006
AUSTRALIA

I will be pleased to discuss any comments you may have about participation in the project.

The project has been reviewed by the University of Canterbury Human Ethics Committee.

**'Transgendered'/'transsexual' identities
and gender reassignment surgery
Consent Form**

For the interview participant:

I have read and understood the description of the above-named project. On this basis I agree to participate in the project, and I consent to the publication of information I provide in this interview with the understanding that anonymity will be preserved. I understand also that I may at any time withdraw from the project, including the withdrawal of any information I have provided.

Signed..... Date

For the researcher:

I agree to abide by the conditions set out in the information sheet and consent form. I also agree to respect any additional conditions set down by the interview participant.

Signed..... Date.....

INTERVIEW QUESTIONS

Section A

Transgender communities - local, national and international

I'd like to start with some questions about the transgender community here in (name of city) Christchurch/Wellington/Sydney.

1. Is there a transgender community in (name of city)?
2. If so, have you been involved in the transgender community in (name of city)?
3. What sort of support does the (name of community) offer individuals? (formally/informally)
4. What do you think are some of the major issues facing transgendered people?
5. Is there agreement about these issues in the transgender community here in (name of city)?
6. Is the (name of community) involved in political work? (i.e. agitating for anti-discrimination legislation, supporting people who have issues with employers, local government etc).
7. Do you know if your concerns/solutions to these problems are shared by people in other transgendered communities?

Differences and connections

8. In what ways do you think people who identify as transsexual/transgendered differ from Drag Queens, transvestites and hermaphrodites? Are these differences important to people who are involved in the transgender community?

Section B

Magazine articles - your responses

In this extract from a magazine article Sarah suggests that people who have a gender identity that is different from their anatomical body at birth have 'an over-developed sense of what gender is'.

I tend to think that I have an over-developed sense of what gender is, I am acutely aware of it all the time, namely because I don't feel comfortable in the one that was assigned to me - Sarah (from *Canta* Issue 10, 22/05/96 p. 15).

Do people who wish to change their gender from the one they were assigned at birth have an 'over-developed' sense of what gender is?

In another context feminist Simone de Beauvoir wrote 'one is not born, but rather becomes a woman...' (From *The Second Sex* 1953, 273).

Do you think that gender is a process, something we learn, or do you think that it is inherent or 'inborn'?

Or to put it another way is it both a matter of who you feel you 'really are' and a process?

In an article in the New Yorker magazine Michael (who has changed his anatomical gender from female to male) says...

"I'm not a professional transsexual. I don't think of myself as transsexual anymore. I was one, I made that transition, now I'm just a man" - Michael interviewed in Bloom (From 'The body lies' in *The New Yorker*, July 18, 1994 p. 49).

Michael no longer identifies as a "transsexual". What would you see as the advantages and disadvantages of rejecting a transsexual/transgender identity in these circumstances?

Some people who have changed from male to female have spoken about the loss of privilege and status associated with their transition from male to female identities.

'If wealth and power are important, and if in this world wealth and power belong to men, then why did I cease being a man and give up that wealth and power'? - Kate Bornstein (from *Mondo 2000*, issue 13, 1995 p. 116).

We live in a patriarchal (male dominated) society, a man still has more status than a woman does - Sarah (from *Canta* Issue 10 22/05/96 p.16)

Conversely people who change their gender identity from female to male sometimes talk about 'stepping into the trappings of power as men' (Bornstein from *Mondo 2000*, issue 13 1995 p 116).

Do people who adopt a different gender from the one they were assigned at birth talk about, or notice, these differences in status/power between men and women?
Can you describe these differences or give some examples?

According to Sarah...

There are nearly as many different views on the condition of transsexuality as there are transsexuals. Some believe that it is isn't a biological condition, but rather a construct of the artificial dichotomy of gender in Western society. In one way this is correct, in that a two gender system is an artificial creation, that there are definitely more than just two sexes. - Sarah (from *Canta* Issue 10 22/05/96 p. 17).

Do you agree with Sarah? Is the two gender system an artificial creation or are there inherent differences between people? Are there more than two sexes?

In '*The Transsexual Empire*' Janice Raymond suggests that transsexuals are

psychologically unstable victims of a society that over-emphasises the roles of sexual insignia (gender) and sexual difference (anatomy).. (From Amy Bloom 'The body lies' in *The New Yorker*, July 18, 1994 p. 38)

Amy Bloom says that...

If the people involved were less nuts and society were less rigid, it seemed, neither transsexuals nor the surgery they seek would exist (From Amy Bloom 'The body lies' in *The New Yorker*, July 18, 1994 p. 38).

How do you respond to these comments?

Amy Bloom indicates that some of 'the psychological literature suggests that transsexualism is a behavioural problem with a surgical solution' (Amy Bloom, *The New Yorker*, July 18, 1994 p. 47).

How do you respond to the claim that "transsexualism" is a 'behavioural problem'?

Is "transsexualism" a psychological problem?

Do you think people who have/desire gender reassignment surgery differ from people who have/desire cosmetic surgery?

Is it more socially acceptable to have cosmetic surgery than it is to have gender reassignment surgery? Why?

In what ways, if any, are these medical procedures similar/different?

How do you respond to suggestions by some feminists that transsexuals are erotically attracted to those of the same gender and change their anatomy in order to be heterosexual?

Kate Bornstein says she feels she was manipulated into having surgery because our culture insists that our gender and our anatomies match up...

I resent that I was manipulated into that surgery by every signpost in the culture. I was a total subscriber to the Binary and to the genitals by which it stands. I knew I wasn't a BOY, I knew I wasn't a MAN. Neither of those categories fit for me...The only other option I saw in the culture was GIRL, or WOMAN. Nowhere else did I see that it was okay to be a "real woman" - which I believed in -with a penis! So the next step was get rid of the penis. This insistence on the Binary and the genital imperative that signals the Binary coerced me into that - Kate Bornstein (from *Mondo 2000*, issue 13, 1995 p. 116).

Do you agree with Kate Bornstein? Why? Why not?

If we lived in a society where gender did not matter, or was not so tied to anatomy, would this make a difference to transsexuals/transgender people? How?

Kate Bornstein describes herself as a "gender outlaw" who is

looking forward to us all living in...a 'Third Space'. I don't say there is a third space that exists between men and women. I say there is a third space outside of the Binary which leaves the Binary (understandings about male and female) as this construct off to the side, very fragile and apt to fall apart".

If we lived in this third space and "if I were a man, everything about me that brings me grief in the world....wouldn't even matter..." (from *Mondo 2000*, issue 13, 1995 p. 116).

What do you think about this 'third space' which Kate Bornstein discusses?

Do you think that some transgendered people live in that third space now?

Have your ideas about masculinity and femininity and transgender changed in the last few years? How?

Is it possible to have a 'real' woman with a penis and a 'real' man with a vagina as Bornstein suggests?

What makes it difficult to live in a body which is female but has a penis, or is male but has no penis?

Luis who has changed his anatomical gender from female to male states:

Gender is slippery. I used to see it as black and white - men, women, that is it. I wanted to be perceived as a male, in a male role, with male attributes. I don't hold on to that anymore. Male, female - I don't even understand that anymore. And I find, after all this (surgical intervention) it doesn't matter much" - Luis (From Amy Bloom 'The body lies' in *The New Yorker*, July 18, 1994 p. 40).

Do you agree with Luis? Why? Why not?

Section C

Gender-reassignment surgery

I'd like to finish with some questions about the use of hormone replacement therapy and the range surgical procedures available to people who want to change their anatomical gender.

1. Have you used hormone replacement therapy or surgical procedures?
2. Have you tried to find out more about hormone replacement therapy and/or gender reassignment surgery?
3. How did you find out about these procedures?
4. What do you think about gender reassignment surgeries?
5. What do you think are the positive and negative aspects of these procedures?
6. Is there a lot of discussion of them in the community in (name of city)?
7. Are there different views on hormone replacement therapy and gender reassignment surgery in this community?

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